



Taste of Highwood & Highwood Days 2026 Vendor Application

In order to reduce paper use, please note that this application can be filled out on your computer.

1) Save a copy to your hard drive for your records

2) Email the completed form as an attachment to sydney@celebratehighwood.org

Celebrate Highwood's Taste of Highwood will take place **Friday, July 17 - Sunday, July 19, 2026**, in Everts Park (102 Highwood Ave Highwood, IL 60040). The festival operates on all dates, RAIN or **SHINE**.

Vendor application deadline is **Friday, July 3, 2026**. Upon acceptance as a Celebrate Highwood vendor, a **non-refundable** payment to: **Celebrate Highwood** will be **due in full** on, or before, **Friday, July 10, 2026** or you will incur a **\$50 late fee**.

The vendor participation fee for Taste of Highwood restaurants is **\$250**. Artisan/craft vendor fee is **\$150** for Highwood artisan/craft vendors.

Dates: Friday, July 17 – Sunday, July 19, 2026

Time: Friday 5-9 PM; Saturday 1-9 PM; Sunday 1-7 PM

Location: Everts Park (102 Highwood Ave)

Company Name: _____

Contact Name: _____ Date: _____

Phone Number: _____ or Cell Number: _____

Street Address: _____

City, State: _____ Zip Code: _____

E-mail Address: _____

Website / Facebook Page: _____

1. Booth space of **10' x 10'** is **provided** as part of the fee. (Note: Any larger space will be charged an additional fee.)

Required Booth Size: _____

2. **Basic electricity will be included in your booth fee.** For large electric needs, a **\$50 fee** will be added. (Note: A detailed list with equipment information is required i.e. if you have any refrigeration, cooking and/or warming equipment.)

- *Vendors using electricity are **required to bring a 100 ft., 3-pronged outdoor rated and UL approved extension cord** for each hook-up.*
- ***Any lighting must be LED and provided by vendors.** Lighting for booths does not count towards additional electrical fees.*

How many amps of electricity does your set-up require? _____

Please provide a detailed list of equipment you intend to bring:

3. Will you be distributing samples or preparing food on site? YES _____ NO _____

- *If you answered **YES**, you will be **required** to obtain and provide a **Temporary Food Service Permit** from the Lake County Health Department. Information and permits can be obtained at <http://www.lakecountvil.gov/2313/Food-Safety> or by calling 847-377-8040.*

If you need assistance with acquiring a food service license, please feel free to contact us so that we may help you through the process.

4. **Items for Sale:** Please provide a comprehensive list of items you intend to sell. This is the information that will appear on various marketing materials to promote your products. **All items for sale must be pre-approved.**

CONTACT INFORMATION

Email: sydney@celebratehighwood.org

Address: Attn: Taste of Highwood
Celebrate Highwood
17 Highwood Ave.
Highwood, IL 60040

Phone: (847) 432-6000

Please visit our website for news and announcements: www.celebratehighwood.org.

Click [here](#) to join our newsletter!

AGREEMENT OF TERMS

Yes, I would like to participate in the *Celebrate Highwood Taste of Highwood 2026* and hereby agree to sell or offer for sale at the event only such items which are listed in the application, and which are of my/our production on the described property.

I/We swear that all information is correct and complete to the best of my/our knowledge. I/We hereby affirm that I/we have read and understand the CONDITIONS OF PARTICIPATION in the 2026 *Vendor Handbook* and agree to abide by all rules that have been established for the operation of the event. I/We acknowledge full responsibility for all activities and conduct. I/We further acknowledge full responsibility for all activities conducted throughout the term of this permit and agree to hold Celebrate Highwood and the City of Highwood harmless and to indemnify Celebrate Highwood and the City of Highwood from any and all claims arising under this permit. I/We also affirm that I/we carry an insurance policy that will protect against liability and that I/we must carry proof of said insurance when attending Taste of Highwood. Enclosed herewith is my application for the 2026 Taste of Highwood.

Printed Name: _____ Date: _____

Signature: _____



AFFIDAVIT

The participant assumes all responsibility for and shall bear all liabilities and expenses relating to the products offered for sale. The participant shall save the sponsoring groups, event managers, The City of Highwood, Celebrate Highwood, their successors, agents and assigns harmless from and against and indemnify them for all liability, loss, cost, attorney's fees, expenses or damages howsoever caused by reason of products sold by participant or any act of omission of participant, including but not limited to any injury (whether to body, property, or personal or business character or reputation) sustained by any person to any person or to property, and for any violation of municipal, state or federal laws or regulations governing the products of their sale, which may result from the sale or distribution of the products by the participant.

The participant shall further indemnify sponsors, The City of Highwood, Celebrate Highwood, their successors, agents and assigns from all costs and attorney's fees incurred in successfully defending or prosecuting any dispute regarding a violation of the rules and regulations set forth under this agreement.

I agree to sell or offer for sale only those items listed on the vendor application and approved by Celebrate Highwood. I acknowledge full responsibility for my activities and conduct and those of anyone working in my space at the Celebrate Highwood event and hereby acknowledge receipt of the rules of operation and agree to comply with them.

Business Name: _____

Printed Name: _____

Signature: _____ **Date:** _____