



Saturday, September 24, 2016

VENDOR VILLAGE APPLICATION

Group/Business Name: _____

Address: _____

Contact Person: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Please provide a brief description of your booth. Include: items for sale, handouts, samples, etc.

Westwood Day will take place from 10:00 AM to 3:00 PM at the Westwood High School.

Event will be held Rain or Shine, and no refunds will be given.

Vendor Village Spaces 18' X 20'

Fee (Includes one 8 foot table and two chairs)

Non-Westwood Business & Individual

\$110.00

Westwood Business & Individual

\$85.00

Student groups & Non-profit Organizations

\$35.00

All event participants will need to complete a Westwood Day CORI Form 2016 and submit to the Police Department either in person or through mail or fax. The form asks for full name, address, and social security number and because of the sensitive information we ask that the form not be emailed. For the convenience of our participants the forms can also be delivered to the Westwood Recreation Department. Recreation staff will collect form and register the participant name, organization affiliation and date delivered. All forms will be placed in an envelope marked confidential and will be delivered to the Chief of Police.

The deadline for all participant background checks will be the Friday one full week prior to the event (Friday, September 16.) Two days prior to the deadline for Vendor Applications (Wednesday, September 14), Recreation staff will cross check the list to ensure that each group or participant has a background check representative.

To secure your spot register today. Spaces are on a first come first served basis. A completed application includes the form on this page, a check and completed CORI forms for the people that will be working on Westwood Day. A letter of confirmation will be sent out within two weeks upon receipt of your application and payment. The Westwood Day Committee reserves the right to decline space that is not compatible with the goals and objectives of the day. Tents and electricity will **NOT** be provided. If you are bringing your own tent please specify the size _____.

Please make check payable to *Town of Westwood*. Checks and applications may be dropped off at the Westwood Recreation Department during normal business hours, or mailed to the address below.

VENDOR CHECKLIST:

Completed Application: _____

Completed CORI forms for those attending Westwood Day: _____

Check: _____

Westwood Recreation Department

Attn: Westwood Day

240 Nahatan Street

Westwood, MA 02090

Questions: Contact Julie Harrington Jharrington@townhall.westwood.ma.us

Fax #: 781-320-0376



**CRIMINAL OFFENDER RECORD INFORMATION (CORI) FOR WESTWOOD DAY
ACKNOWLEDGEMENT FORM**

TO BE USED BY ORGANIZATIONS CONDUCTING CORI CHECKS FOR EMPLOYMENT, VOLUNTEER,
EVENT PARTICIPATION, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES.

The Town of Westwood is registered under the provisions of MGL. c. 6 § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, event participants, license applicants, current licensees, and applicants for the rental or lease of housing.

As a prospective or current employee, subcontractor, volunteer, event participant, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to the Town of Westwood to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing the Town of Westwood written notice of my intent to withdraw consent to a CORI check.

**FOR EMPLOYMENT, VOLUNTEER, EVENT PARTICIPATION AND LICENSING
PURPOSE ONLY**

By signing below, I provide my consent to a CORI check for the below listed purpose:

Event Participant for Westwood Day 2016

SIGNATURE _____
DATE

Last Name First Name Middle Initial Suffix

Maiden Name (or other name(s) by which you have been known)

Date of Birth Place of Birth

Social Security Number: _____ - _____ - _____ (full number is required)

Driver's License or ID Number	State of Issue
-------------------------------	----------------

Mother's Full Maiden Name	Father's Full Name
---------------------------	--------------------

Street Number and Name	City or Town	State	Zip Code
------------------------	--------------	-------	----------

Westwood Day Group or Organization Affiliation (Example: Charlie's Chowder House)

The above information was verified by reviewing the following form(s) of government-issued identification:

VERIFIED BY: _____

Name of Verifying Employee (Please Print)

Signature of Verifying Employee

Mail, fax or deliver form to:
Chief of Police, Westwood Police Department
590 High Street
Westwood, MA 02090
Fax # 781.326.4609

**For any questions regarding this form please contact the
Chief of Police at 781-320-1000 or email jsilva@westwoodpd.org**

IMPORTANT: DO NOT EMAIL FORM – SENSITIVE INFORMATION ENCLOSED