



**FESTIVAL  
DE LA FAMILIA**  
www.festivaldelafamilia.org

## 2012 FESTIVAL DE LA FAMILIA COMMUNITY OUTREACH APPLICATION

Contact Name: \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Name to appear on booth sign (22 letters maximum): \_\_\_\_\_

Non Profit Status: \_\_\_\_\_ Check One: Tax Exempt \_\_\_\_\_ Non-tax Exempt \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone/Mobile Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-Mail (*Please Print*): \_\_\_\_\_ Website: \_\_\_\_\_

### Selection Criteria for Participation:

- Community Outreach booths must represent a group, association or public agency.
- Participants must promote services provided to the Latino community.
- Booths must have bilingual personnel available throughout the event.
- Booth activities must promote a positive image of Latino values, contributions, and culture.
- Preference will be given to booths with interactive, engaging activities.
- Sales of items, food, drinks, etc. are not permitted.

### QUESTIONS

1. Have you participated in the past with Festival de la Familia? ( ) NO ( ) YES No. of years \_\_\_\_\_
2. Please explain how your proposed booth activities are family oriented, interactive, and educational?

3. Do you provide services specifically targeted to the Latino community? ( ) NO ( ) YES  
 If yes, identify those services:

\_\_\_\_\_

If not yet, describe planned services: \_\_\_\_\_

\_\_\_\_\_

4. How will you ensure bilingual staff coverage within your booth?

\_\_\_\_\_

5. Do you plan to distribute printed materials, handouts, and/or give-aways? ( ) NO ( ) YES

If yes, prepare to have supplies sufficient to serve a large crowd. We recommend a minimum of 1,000 copies or number of items.

6. How many people will staff your booth during the Festival Event? \_\_\_\_\_

\_\_\_\_\_

| <b>FEES – All fees, must be received by March 30, 2012</b>  |                  |          |
|---|------------------|----------|
| <i>Request for multiple spaces cannot be guaranteed.</i>  |                  |          |
| <b>10' x 10' space, one table, two chairs &amp; shade canopy.</b><br><i>Every vendor booth will receive a parking pass &amp; two admission tickets.</i> | No. ____ x \$325 | \$ _____ |
| <b>Parking Passes &amp; Admission Tickets</b>   |                  |          |
| <i>Specify amount of extra parking passes &amp; admission tickets needed.</i>   |                  |          |
| <b>Additional Parking Passes</b>  | No. ____ x \$10  | \$ _____ |
| <b>Additional Admission Tickets</b>   | No. ____ x \$10  | \$ _____ |
| <b>Late Fees</b>  |                  |          |
| <i>(if applicable)</i>  |                  |          |
| <b>Late Application Fee (if postmarked after March 16, 2012)</b>  | \$25             | \$ _____ |
| <b>Late Payment Fee (if postmarked after March 30, 2012)</b>  | \$50             | \$ _____ |
| <b>NOTE: Additional Fees for Electricity</b>  | <b>\$50</b>      |          |
| <b>TOTAL AMOUNT DUE</b>   |                  | \$ _____ |
| <i>Make Check or Money Order Payable to Festival de la Familia – Community Outreach</i>   |                  |          |

**NAME OF ORGANIZATION & PERSON WHO WILL ISSUE CHECK (Example:  
Sacramento County Health Department, Jane Smith)**

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**SPECIAL NEEDS/REQUESTS (Specific location may be requested, but cannot be  
guaranteed):**

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Questions or Comments, please include them and the Committee will respond as soon as possible.

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**APPLICATIONS MUST BE POSTMARKED OR EMAILED BY MARCH 16, 2012.**

**Mail to: FDLF Community Outreach Committee,  
ATTN: Jackie Gallegos  
5325 Elkhorn Blvd, Box #245  
Sacramento, CA 95842**

**Call (916) 348-7085 or (916) 616-9909  
Email: [JackieGallegos@comcast.net](mailto:JackieGallegos@comcast.net)**