Karuk Community Health Clinic

64236 Second Avenue Post Office Box 316 Happy Camp, CA 96039 Phone: (530) 493-5257 Fax: (530) 493-5270



Administrative Office

Phone: (530) 493-1600 • Fax: (530) 493-5322 64236 Second Avenue • Post Office Box 1016 • Happy Camp, CA 96039

Karuk Dental Clinic

64236 Second Avenue Post Office Box 1016 Happy Camp, CA 96039 Phone: (530) 493-2201 Fax: (530) 493-5364

Vendor Application and Guidelines

For the 26th Annual Karuk Tribal Reunion

Deadline for Vendor Application is Monday, August 11th, 2025

(Late applications may be considered based on space availability)

Event Information:

The Karuk Tribe seeks vendors for the 26th Annual Karuk Tribal Reunion. The reunion is scheduled for Saturday, September 13th, 2025 beginning at 8:00 AM and will be held at the Karuk Administrative Complex located at 64236 Second Avenue in Happy Camp, CA. All vendors and patrons are welcome. This is a drug and alcohol-free event.

Set-Up/Take Down:

Vendor set-up begins at 7:30 AM on Saturday, September 13th, 2025. Vendors *MUST* check-in at the Vendor Booth to be directed to their pre-designated area. All booths must be set-up and all vehicles removed from the Administration Complex by 8:30am. Vendors may have vehicles in the Administrative Complex again any time after 4:00pm for take down. Vendors are welcome to continue using their booth until the closing of the event. <u>Vendors must provide their own</u> table(s), chair(s), and display equipment and are responsible for clean-up of assigned area.

Merchandise:

The sale of items highlighting and/or encouraging negative activities, including, but not limited to guns, knives, brass knuckles, drug paraphernalia, etc. is prohibited by the Karuk Tribe. The Karuk Tribe reserves the right to ask any vendor to remove any item deemed inappropriate from his/her booth.

Local Information:

Klamath River RV Park: http://www.karuk.us/index.php/menu-rvpark
Forest Lodge Motel
Klamath River Resort Inn
Elk Creek Campground

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		Vendor Application
Contact Name:		Organization:
Phone:	Cell:	: Email:
Mailing Address:		
Description of Iter	ns to be sold:	
Please Check App	propriate Box:	
□ Non-Profit	☐ Profit	☐ Informational/Education ☐ Food
Amenities: Water	(Food vendors w	will receive priority) \square Electric \square
Please indicate if	you will be usin	ing a generator: Yes □ No □
Will you need Wi	-Fi for point of	f sale technology: Yes □ No □
Booth space requ	ested:	
10 x 10 Ft. Single	Space for Profit	t Booths FREE
20 x 20 Ft. Double	e Space for Profi	fit Booths FREE
Custom Space Ple	ase Specify:	
I hereby certify the	at the above info	formation is true and correct and I further agree to all the term

Contact Information: Karuk Tribe, Emma Lee Perez, PO Box 1016, Happy Camp, CA 96039 Phone: 530-493-1600 Ext. 2017 Email: rfpresponse@karuk.us

and conditions included in the Vendor Guidelines.

Date: _____

Signature: