

"A Fair to Remember!" August 26-27-28, 2016

Please fill out this form completely (all fields should be filled in). Incomplete applications will not be accepted. Booth space is available on a first come, first paid basis (a space is considered paid for when the check clears both banks). No refunds will be given after July 1.

Your Name:		
Business Name:		
Wisconsin Seller's Permit Number:		
Address:		
City:		Zip:
Email address:		
Product:		
Do you need access to power? *Please note that t power and that space is limited.* (please provide s	here is an additional c	harge of \$10 for access to
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Have you been a vendor at the Florence County F □ Yes □ No; If yes, list dates(years):		
What to send with this Vendor Booth Rental Applic ☐ A picture of your trailer (if applicable and if not ☐ Proof of Insurance Please supply a copy of y ☐ References Please supply three references i name of the event/organization in which you page	cation: provided with previous our proof of insurance ncluding: name, addre	vendor application) with payment.

The Florence County Agricultural Society (FCAS) produces a family fair and as such, *all product & information must be suitable for displaying to families with young children.* Out of fairness to our vendors, the fair board limits duplication of product. Final decision on the approval of any vendor application rests with Fair Board.

Outdoor space approximately 10' x 15' – If you will be exceeding this space, you will need to purchase a second vendor space. Electrical space is limited. Please note that preference will be given to vendors who will be at the fair for the entire length of the fair (3 days).

\$30.00 (non food vendors) for 3 days (includes \$5 admission pass)

\$55.00 (food vendors*) for 3 days (includes \$5 parking pass)

* Food Vendors are those vendors who make and sell food for consumption at the fair.

Special rules may apply for non profit organization booth * please call for information.

Vendor supplies tables, canopy, power cords, etc. Rustic camping is available on the grounds for an additional \$10.00 per day.

Hours of Operation: Friday, 3 pm-8 pm; Saturday, 11 am-8 pm; Sunday, 11 am-5 pm*. You may open earlier or stay open later, but your vendor booth must be open during the listed hours of operation. *Please note that the Draft Horse Pull is scheduled to begin on Sunday at 3:00 p.m. This event may go later than 5:00 p.m. and you are encouraged to stay open while the event is still occurring.

Vendors are responsible for applicable Wisconsin State & County Sales Taxes.

No. Needed	Туре	Cost	Total
	Non Food Vendors (3 Days)	\$30.00	
	Food Vendors (3 Days)	\$55.00	
	Electricity Fee for Vendor Space	\$10.00	
	Parking Pass (First pass included for paid vendors only)	\$7.00	
	Rustic Camping Space Specify: Th Fr Sat Sun	\$10.00	
	Security Deposit (required for all vendors)	\$50.00	50.00
	make checks payable	Total Amount Due to the "Florence County Fair"	

General Release and Acceptance of Rules:

I (We) have read all of the "Rules and Regulations" enclosed in the Vendor Manual for the Florence County Fair and agree to abide by said rules. In addition, I (We) the applicant(s) do expressly release the Florence County Agricultural Society and Florence County Fair Board of any and all liability for any damage, injury or loss to any person or goods which may arise from the rental and occupation of said space by the applicant, and agree to hold and save the Florence County Agricultural Society / Florence County Fair harmless of any loss or damage by reason thereof.

It is mutually agreed that all information shown on this application, including the Rules and

Regulations included in the Vendor New parties upon acceptance by the Flore understood that if this application is reported in the control of	ence County Agricultural Socie	ety / Florence County Fair. It is
Signature of Vendor/Applicant	Title	Date
Accepted by the FCAS	Title	 Date
Send completed form, proo	f of insurance and references	along with full payment to:

Florence County Fair; P.O. Box 704; Florence, WI 54121

Reference #1 Name: Title: Organization: Phone Number: ____ E-mail Address: Address: _____ City: _____ State: _____ Zip: _____ Reference #2 Name: Title: _____ Organization: Phone Number: E-mail Address: _____ Address: ____ State: ____ Zip: ____ City: Reference #3 Name: _____ Title: Organization: Phone Number: E-mail Address: Address:

State: ____

Zip:

City: