

## WALWORTH COUNTY FAIR APPLICATION FORM FOR COMMERCIAL/ FOOD VENDOR

Returning Vendor Application DUE BY: December 15, 2023 New Vendor Application DUE BY: March 31, 2024

Retur Vendor	ning New Ve	endor		
		you carefully complete at. Incomplete or illegible		application form. Remembe consideration.
Logal Bus	inoss Namo:			
	iness Name:			
	Owner:			
	nt Mailing Address:			
				Zip:
	dia: YES or NO			· · · · · · · · · · · · · · · · · · ·
Coolai iiio				
BOOTH:				
Inside:	Number of Inside Booths (Booth space is 10' x 10'	S: r)		
Outside:	(Must include awnings	eeded: Frontage, overhangs, trailer hitch (s) of your unit that you wil : YES or NO	es, tent stakes, etc. tot	al area utilized)
ELECTRICA	L REQUIREMENTS:			
MANDATO	ORY UTILITY COST: Elec	ctrical use		
AN	IPS –110v	AMPS -220v		
WATER/SEV	VER/STOCK TRUCK NI	EEDS:		
RUNNING	WATER: YES or NO	ACCESS TO WA	TER: YES or NO	SEWER: YES or NO
	RUCK: YES or NO what is the total length & v _AMPS –110v	width of unit: Length AMPS –220v	feet x Width	feet
DUOTO/SCU	EMATIC OF EVUIDIT			

## PHOTO/SCHEMATIC OF EXHIBIT:

Please enclose a clear photograph or detailed professional schematic drawing of your exhibit/booth and any literature pertaining to your product(s) or services(s).

Returning vendors do not have to send any photos.

## ITEMS SOLD/SERVICES OFFERED / FOOD ITEMS: List ALL food, beverages, sundry items, or any other items to be sold, exhibited and/or demonstrated (Please note if they will be sold/exhibited/demonstrated). Gifts, novelties and craft items must be specifically and individually listed. Service and hand out information must explain exactly what you will offer to the guest of the fair. ("Same as last year" or "Etc." is not acceptable!) If you need more space, please enclose a separate piece of paper to describe your items or services offered. REFERENCES: Please provide complete information from three fairs, hobby or trade shows, or similar events at which you have sold or demonstrated your product(s) and/or exhibited your service(s). (If this is your first event, please state that) 1. Show Event \_\_\_\_\_ 2. Show Event \_\_\_\_ Show Event SPONSORSHIP: Do you wish to advertise in the 2024 Fair Schedule for \$250? Limited space is available YES or NO PLEASE REMEMBER THIS IS AN APPLICATION FORM FOR COMMERCIAL EXHIBIT / FOOD SPACE. THIS IS NOT A CONTRACT. PLEASE DO NOT SEND PAYMENT WITH THIS APPLICATION. Map layout is subject to change. Booth space/map layout is made solely by the Commercial Committee. We will review each application. We reserve the right to accept or reject any applicant based on the uniqueness and vou have exhibited.

quality of products sold or service, exhibited appearance of your space/booth, and references from other show(s) at which

## **SIGNATURE:**

I certify the information on this exhibit space applica	ion is complete and true, to the best of	my knowledge.
(Signature of owner as stated on front)	(Date)	

PLEASE RETURN THIS TO: **WALWORTH COUNTY FAIR** P.O. BOX 286

**ELKHORN WI 53121** 

peggy@walworthcountyfair.com Phone: (262) 723-3228