

South Florida Fair
Exhibits and Concessions Manual
www.southfloridafair.com

P. O. Box 210367
West Palm Beach, FL 33421-0367

Physical Address:
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West Palm Beach, FL 33411
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Exhibits & Special Events Manager
Lorie Stinson, CFE
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Concessions
Lisa Nichols
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Officers and Division Directors:

Robert Weisman
Chair, Board of Trustees

Vicki Chouris, CFE
President/CEO

Matt Wallsmith, CPA
Vice President/CFO

Becky Brashear, CFE
Director of Business Development

Alex Rodriguez
Director of Operations

Rita De Mier-Lincoln, CFE
Director of Brand Management

Shamel Jalahej
Director of Finance

Jeff Swank
Director of Safety & Security



2023 SOUTH FLORIDA FAIR
January 13 - 29, 2023

APPLICATION FOR SPACE

Please check: [] New Applicant [] Returning Applicant

PLEASE PRINT

NAME OF BUSINESS: _____

CONTACT NAME: _____ FEIN#: _____

SALES TAX DEALER # _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: () _____ FAX:() _____

EMAIL: _____ CELL:() _____

TYPE OF EXHIBIT

Food Sales _____ Direct Sales _____

What age is your target market? _____

PRODUCT: List ALL items you would like to sell or display. If selling, give price range \$ _____

Multiple blank lines for listing products and price ranges.

Stock Truck? _____ Yes _____ No

Stock Truck Electric: _____ Yes _____ No

Camping? _____ Yes _____ No

INDOOR SPACE REQUIREMENTS
10'x10' or 15'x10' increments

Booth size requested _____ x _____

Do you need pipe & drape? _____ Yes _____ No

What is the largest space you can attractively fill: _____ x _____ What is the smallest?: _____ x _____

OUTDOOR SPACE REQUIREMENTS
Fair Experience Is Required

Do you have: Trailer _____ Tent _____ Other _____ If trailer, is the hitch removable? Yes _____ No _____

Front Footage: _____ Depth: _____ Center _____ x _____

How many sides can you sell from: _____

REFERENCES

Have you ever exhibited at the SOUTH FLORIDA FAIR: Yes _____ No _____

If yes, when: _____

List name of company at that time: _____

Please check trade organizations you are a member of: OABA _____ NICA _____ IAFE _____

Florida Federation of Fairs _____ Other _____

How many years has your business been in operation? _____

List Fairs/Festivals you have been associated with and a contact person/telephone number at each event.

1) _____

2) _____

3) _____

4) _____

Please return your application to:

South Florida Fair
Attention: Exhibits/Concessions Department
P. O. Box 210367
West Palm Beach, FL 33421-0367

I HAVE READ AND UNDERSTAND ALL THE MATERIALS REQUIRED TO EXHIBIT AT THE SOUTH FLORIDA FAIR, INCLUDING INSURANCE INFORMATION AND RULES AND REGULATIONS.

Signature: _____

Date: _____

IMPORTANT!

NEW VENDORS: This application MUST include a recent photo of your set up. Applications without photo will not be considered.

RETURNING VENDORS: Please include pictures of your booth(s). Any changes in products sold or booth appearance must be included in your application.

*** For your application to be considered, all parts of this form must be filled out completely - This is an application for space, not a contract or offer to enter into a contract. Application does not guarantee space**

*** Deposits will NOT be accepted with applications. If a contract is offered, deposits are immediately due**

**- Insurance requirements and the Rules & Regulations are available at:
www.southfloridafair.com/VendorInfo**