

**ORLEANS COUNTY
CORNELL COOPERATIVE EXTENSION**
2017 Orleans County 4-H Fair Vendor Application
One booth per form only



Participation in fair is first come first serve upon receipt of deposit. No exhibitor may set up without first completing all required vendor paperwork.

Business Name:	Contact Name:
Tax ID#/SSN:	Email:
Telephone:	Address

1. **DEPOSIT:** A **\$150 deposit is REQUIRED** of all commercial exhibitors. Your spot is not guaranteed until the deposit is received. Your deposit will be refunded within 30 days of the close of the event. Deposits will be forfeit in the case of a no show. Release time for outdoor exhibits will be after 11:00 pm on Saturday night. Indoor exhibits will be released at 8:00am Sunday. Teardown prior to designated time without prior approval will result in forfeit of deposit.

Name and address to which to return deposit if different from above:
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2. **RENTAL FEE (Check appropriate level): If submitted after July 1 include \$25 late fee.**
- ___ **Lartz Exhibits Building Single:** 10' x 11' - \$200 rental fee (includes electric and wifi)
 - ___ **Lartz Exhibits Building Double:** 20' x 11' - \$300 rental fee (includes electric and wifi)
 - ___ **Outside Small Space:** 20' x 20' - \$100.00 rental fee.
 - ___ **Outside Large Space:** 20' x 40' - \$175.00 rental fee.
 - ___ **Food Concession Space:** 20' x 20' - \$350.00 rental fee
 - ___ **Stock Trailer Hookups and Camping** are available at the cost of \$100.00 for the week per unit.

3. **POWER REQUIREMENTS (outdoor and food vendors only):** Please indicate electrical appliances and the number that will be used in your booth. State voltage and amp usage for each. Electric is 3 Phase at 208 Volts.

Number and type of outlets needed: ___110___220
Circuit breaker protection (in amps): ___110___220

* Exhibitors must supply first 50' of electrical cord.

Electrical fees are outlined in the chart below.

Electric Hook-Up Fees	
Fee for 1 to 30 amps	\$25
Fee for 31 to 50 amps	\$50
Fee for 51 to 75 amps	\$75
Fee for 76 and over amps	\$100

10. The Commercial Exhibitor agrees to abide by all rules and regulations set forth in this contract and the attached Concessions/Vendors Handbook. Violations of the rules and regulation in the handbook may result in fines up to \$500.

11. **PAYMENT:** All fees are due and payable upon return of this contract and are non-refundable. *Checks must be made payable to Orleans County Cornell Cooperative Extension.* Please mark on check that this is for Commercial Exhibits.

Mail to: Orleans County Cornell Cooperative Extension, C/O Commercial Exhibits
12690 NYS Route 31 Albion, NY 14411

Deposit	\$150	<u>Application checklist</u>
Rental Fee	\$	
Electrical	\$	
Camping/ Stock Unit	\$	
Late Fee (after July 1)	\$	
<i>Total Amount Due</i>	\$	

- Deposit and payments
- Certificate of Insurance
- Hold Harmless Form/Contract
- Insurance Requirements Form
- Proof of Auto
- Menu and pricelist for Food Concessions
- Workers Compensation (proof of, or statement of exemption)

Orleans County 4-H Fair Food Concession Vendor Menu

Food items that will remain exclusive to food stands operated by the Orleans County 4-H Program include: crinkle cut and curly fries, hamburgers, hot dogs and pie.

Item	Price

See vendor handbook for specific rules and regulations regarding menu, exclusives and all other concessions policies.

For Fair Office Use Only

Commercial Exhibitor Checklist

Vendor Name: _____

Vendor Type: **Indoor Single (\$200)** **Indoor Double (\$300)**
 Outdoor Small (\$100) **Outdoor Large (\$175)**
 Food (\$350)

Payment

	Deposit	\$150		
	Rental Fee	\$		
	Electrical	\$		
	Camping	\$		
	Late Fee (after July1)			
	<i>Total Amount Due</i>	\$		
	Amount paid on receipt of contract	\$	Date Received	Check/Receipt #
	Balance Due		Date Received	Check/Receipt #

Paperwork

- Application
- Menu and pricelist for Food Concessions
- Certificate of Insurance
- Hold Harmless Form
- Insurance Requirements Form
- Proof of Auto
- Workers Compensation (proof of or statement of exemption)
- PW Wood Sent Date: _____
- PW Wood Approval Date: _____
- E.D. Signature

Deposit Return:

Date/amount (if not full refund): _____

- Check if no deposit return; explain reason why:
