## CARBON COUNTY FAIR August 5-10, 2024 FOOD REGISTRATION FORM (Includes candy)

## Please fill in all fields (Tab to enter fillable sections). Upon completion, print, sign and mail to the payment address provided below.

Please check one: Non-profit Profit Name of organization or business: Business Name

Contact person: Full Name

Street address: Street Address

City/State: City / ST Zip code: 00000

Telephone: Telephone Email address: Email Address

Items you will be displaying or selling: Items displaying/selling

## ALL VENDORS SUBJECT TO APPROVAL BY VENDOR COMMITTEE.

Minimum size  $10' \times 15'$  depth. Please note a minimum of 15' depth is required for all frontage. Allow room around your stand for servicing and customers.

1. Total size of area requested  $\underline{000}$  ft frontage x  $\underline{000}$  ft depth =  $\underline{0000}$  sq ft x 2.25/sq ft =  $\underline{0000.00}$ 

2. # vendor passes needed (30 supplied), additional passes \$3.50 each x  $\underline{00} = \underline{000.00}$ 

3. Size of covered dining area <u>00</u> ft x <u>00</u> ft = <u>0000</u> sq ft x \$0.50 sq ft = \$ <u>0000.00</u>

4. Vendor insurance, if supplied via CCLLFA insurance carrier @\$85.00 = \$00.00

5. Carbonated beverage fee (\$25.00) – required if selling carbonated beverage = \$00.00

Add lines 1, 2, 3, 4 and 5 and remit payment with registration form **TOTAL** §0000.00

Please indicate your electrical needsImage: 110Image: 220CARBONATED BEVERAGESImage: YesImage: No

**PAYMENT:** 50% down by January 9, 2024. Balance due by July 1, 2024. Site will not be held without payment. All vendors must provide certificate of insurance, naming Carbon County Fair or send additional \$85.00 postmarked by July 1, 2024. NO EXCEPTIONS! Make checks payable to: CCLLFA

PO Box 633

Lehighton PA 18235-0633

NOTE: Check or money order must accompany registration form! Money order only after July 1, 2024. Questions, please call 610-826-1862.

All returned checks will be charged a \$25.00 fee. No refunds after June 1, 2024.

I agree to abide by all rules and regulations of the Carbon County Fair and accept all responsibility for my rented vendor space, product and/or services provided. I further agree to hold Carbon County Fair, its' board of directors, officers and volunteers free from any and all liability.

Signature:

FOR OFFICE USE ONLY				
Initial Payment \$C	Check # Date postmarked			
Final Payment \$C	Check #			
□ □Insurance certificate	□ □ Purchase Insurance	□ □Sales Tax ID number		
□ □ Approved by vendor co	ommittee 🛛 🗆 Paid in full	□ □ Packet mailed	□ □ Additional passes	