



Kenai Peninsula State Fair
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2010 ~ FOOD VENDOR APPLICATION

Company name* _____

*As you want it to read in the program and newspaper – It helps if the business name makes reference to your product.

Contact person and title _____

Address _____

City _____ State _____ Zip _____

E-Mail Address: _____

Day phone for contact person _____ Evening phone _____

Do you plan any of the following:

Conduct a raffle or drawing? _____ If yes, what? _____

Use sound emitting devices? _____ If yes, what? _____

Give away food samples? _____ If yes, what? _____

Do you need electricity? (circle) none 110 220 List item(s) and wattage for each:

Insurance is required for all food booths. If you are purchasing insurance through the Fair Association, please answer the following:

Years of experience _____. Ever canceled/refused coverage _____. Claims last 3 years _____.

List below Menu & Price List

You are limited to Five menu items, not including common beverages such as coffee, soda, etc.

List your menu in priority order.

1. _____

2. _____

3. _____

4. _____

5. _____

Remember, grandfathered spaces are only held until March 15th, 2008. I've read and agree to all conditions on all three pages (Application, Fee Chart and Information) of the contract and verify that all information given is true.

Owner/Operator

Date

Kenai Peninsula State Fair

2010 Fee Chart for Non-food booths

Mark your first, second and third choices on the enclosed map.
Please call the office for further information or availability of spaces.

Your booth will be reserved for you when payment is received.

Remember: *Grandfathered spaces (the one you held in the past) are only reserved for you until April 15th. After that date they will be assigned on a first-come-first-served basis!*

INDOORS – Any building / shelter

Space sizes and prices are found on the enclosed map.

Mark your choice on the map then complete this form.

OUTDOORS – Ground space only / no shelter

One space is 10" x 10"

1 space	\$200.00
2 spaces	\$280.00
3 spaces	\$360.00
4 spaces	\$435.00

* * * * *

If you have a self contained unit, please indicate it's measurement with tongue, awnings, etc., _____ x _____

Please explain any special configuration your unit requires, (direction of pull-in, which side is open, etc.):

****If you want additional space around your booth for a vehicle or camper/camping it must be arranged in advance and there will be an additional charge (there are limited spaces with that possibility).**

- | | | |
|--|---------------------------------|----------|
| 1. Using the above information and enclosed map: | Cost of booth = | \$ _____ |
| 2. Electricity use surcharge at \$25 per space _____ | Spaces x \$25 each = | \$ _____ |
| 3. Additional passes needed _____ | Passes x \$15 each = | \$ _____ |
| 4. Advertisement in fair program _____ | 3" X 1.5" size add \$75= | \$ _____ |

Each vendor will receive two, 3-day adult admission passes.

Each person who works at a booth needs an admission ticket each day.

Please pick up your admission passes in the office on Wed. or Thurs. before the fair.

Price of admission at the gate:	<u>3 day passes</u>	<u>1 day pass</u>
Adults	\$20	\$8
Youth (6 to 12)/Senior (60+)	\$15	\$6
Under 6 years old	Free	Free

4. I wish to purchase liability insurance through the Fair Association for \$75

No Yes

Insurance \$ _____
Total \$ _____

Amount Enclosed \$ _____

Please mail application with payment by check money order or credit card information

Visa Mastercard Credit Card # _____ Exp. Date _____

Billing Address for Credit Card if different from front page _____

Signature of Credit Card Holder _____

Office Use:

Insurance _____ DEC Permit _____