## 2024 Huntsville Fall Fair - Vendor Application



## **CONTACT INFORMATION**

Vendor Business Name:	First & Last Name:
Address:	
Telephone/Cell phone:	Email:
Type of Business/Sales:	
Non-Profit/Charity: YES	NO
LIABILITY INSURANCE	
General Liability Insurance Company:	
Policy Number:	Coverage:
Number of Employees:	
Health Unit Certificate (if applicable): (Attac	ched)
Propane Use: YES	NO
	e; \$20.00 per footage for food vendors. n measurements. Include any extra additions to your t based on frontage information you supply us on

NOTE: No hydro available.

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ALL VENDORS ARE REQUIRED TO BE SET UP AND READY FOR THE FAIR TO BEGIN BY 4PM ON FRIDAY, SEPTEMBER 20, 2024.

FAIR HOURS		
Friday, 4 pm to 11 pm		
Saturday, 9 am to 11 pm		
Sunday, 9 am to 4 pm		
Please sign and date below, as acknowledgemen	nt of Vendor Rules and Completed application.	
Signature Da	ate:	
Please return application, rules and regulations, copy of insurance and payment to		
huntsvillefallfairtreasurer@gmail.com.		

NOTE: No hydro available.

You will be notified if you have been approved.