

**Fair Grove Heritage Reunion 2026**  
**September 26 & 27, 2026**  
**Craft and Food Booth Application**

Business Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Description of products: What you would like printed in program book, 15 words or less.

**Returning Vendors:**

To reserve same booth application must be  
postmarked prior to November 1, 2025

Same Booth:  
# \_\_\_\_\_

Would like to move to:  
# \_\_\_\_\_

**ALL APPLICATIONS MUST BE RECEIVED BY MAY 1, 2026**

Number of Craft Booths Needed: \_\_\_\_\_

Booth Fee **\$130.00** \$ \_\_\_\_\_

**(Limit of 2 booths per new vendor)**

Number of Food Booths Needed: \_\_\_\_\_

Booth Fee **\$195.00** \$ \_\_\_\_\_

(Any Booth that requires contacting Greene Co Health Department)

(Fee is per 10', if trailer is longer, please include correct fee)

**Electric** (20-amp electric very limited availability. Electric fee will be  
returned if electric is not available, first come-first serve basis)

**\$30.00** \$ \_\_\_\_\_

**TOTAL ENCLOSED \$ \_\_\_\_\_**

**THE FOLLOWING MUST BE INCLUDED WITH APPLICATION:**

- Check payable to Fair Grove Historical Society.
- Photo of your products, which will not be returned to you.

By submitting this application to the Fair Grove Historical Society, the undersigned acknowledges receiving, reading and fully understand all of the Guidelines and Regulation of the 2026 Fair Grove Heritage Reunion. I understand that submission of this application, with the required attachments and fees does not guarantee admission to the festival as a vendor. I further understand that if I violate any of the Guidelines and Regulations I may be excluded or asked to leave the Event. My merchandise (in sole or in part) may be excluded or rejected from the Heritage Reunion and booth rental fees, electric and additional parking fees will be forfeited.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Mail application to: PO Box 93, Fair Grove, MO 65648**

*Reunion Use Only*

Postmark Date:

CK #: \_\_\_\_\_

Total \$: \_\_\_\_\_

Conf. E-Mailed:

Booth Assigned: