

**Fair Grove Heritage Reunion 2020**  
**September 26 & 27, 2020**  
**Craft and Food Booth Application**

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

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

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number \_\_\_\_\_

Description of products and what you would like listed in the book in 15 words or less.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like to advertise in the Program Book? YES NO (please circle)

Returning Vendors: To reserve the Reserve Same Booth Would like to move to:  
same booth, your application must  
be postmarked by November 1, 2019. # \_\_\_\_\_

# \_\_\_\_\_

Number of Craft Booths Needed: \_\_\_\_\_ Booth Fee \$95.00 \$ \_\_\_\_\_

Number of Food Booths Needed: \_\_\_\_\_ Booth Fee \$150.00 \$ \_\_\_\_\_

(There is a limit of 3 booths per vendor.)

Extra Parking (One parking permit per vendor is included in booth cost) \$10ea \$ \_\_\_\_\_

Electric (20-amp electric is available to a limited number of booths which will be returned if electric is  
not available, first-come-first serve basis). **SEND SEPARATE CHECK** \$15.00 \$ \_\_\_\_\_

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

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

- 1) Check/Checks payable to Fair Grove Historical Society.
- 2) Photo of your products, which will not be returned to you.
- 3) **Self-addressed stamped envelope** to receive acceptance letter.

**Mail application and each of the above to: PO Box 93, Fair Grove, MO 65648**

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 2020 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: \_\_\_\_\_

**REUNION USE ONLY**

Postmark date: \_\_\_\_\_

Check Number: \_\_\_\_\_

Check Amount \$ \_\_\_\_\_

Electric Check Number: \_\_\_\_\_

Electric Amount \$ \_\_\_\_\_

Extra Parking Amount \$ \_\_\_\_\_

Confirmation Mailed: \_\_\_\_\_

Booth Assigned: \_\_\_\_\_