

**2023 Union County Fair Vendor Contract**

**Boots, Jeans and American Dreams August 2-5, 2023**

PO BOX 976, La Grande, OR 97850

Kathy Gover-Shaw, Fair Manager (541) 786-3733

Organization or Business Name: \_\_\_\_\_

Contact/Representative Name: \_\_\_\_\_ Preferred Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Description of product(s) or service(s). Food vendors MUST include a menu with prices.**

The following three (3) types of vendor spaces are available and space is limited. Since the type of space you request may not be available, please **circle and label** your 1st, 2nd, and 3rd choice and return contract before May 1st.

Choice No.	Available Vendor Space	Minimum Cost
	Exhibit building (approx 10'x10') <b>inside space</b> includes limited lighting and 110v 20 amp receptacle.	\$40 - 2 reusable vendor pass included
	Exhibit building (approx 10'x16') <b>inside space</b> includes limited lighting and 110v 20 amp receptacle.	\$80 - 4 reusable vendor pass included
	<b>Outdoor booth</b> - All <i>non-food</i> vendors - 2 vendor passes included <b>Outdoor booth</b> - Food vendors - 4 vendor passes included <b>Outdoor booth</b> - Extra large food vendors - 6 vendor passes included	\$180 \$250 \$500
	<b>Outdoor Lawn Space 10'x10'</b> Includes access to 110v 20 amp receptacle All <i>non-food</i> vendors - 2 vendor passes included Food vendor - 4 vendor passes included	\$150 \$250
	<b>Outdoor Lawn Space 20 x 10</b> Includes access to 110v 20 amp receptacle All <i>non-food</i> vendors - 4 vendor passes included Food vendor - 6 vendor passes included	\$300 \$500
	<b>Additional 110v 20 amp receptacle</b>	\$10

	<b>Additional vendor passes (Can be purchased at the fair)</b>	\$10 each
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*By signing below, you certify that you represent the organization/business. Your signature binds the organization/business you are requesting permission for to operate concession at the 2022 Union County Fair, and you agree to abide by all the conditions expressed in the rules and regulations. The UCFA grants permission to your organization/business to operate under the conditions stated above and in consideration of fees paid or to be paid.*

\_\_\_\_\_  
Business/Organization Signature

\_\_\_\_\_  
Kathy Gover-Shaw, Fair Manager

**For Office Use Only**

Date application received: \_\_\_\_\_

Amount Due: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Cash or Check # \_\_\_\_\_ Date Paid: \_\_\_\_\_

Assigned space: \_\_\_\_\_ Insurance Form: \_\_\_\_\_ Vendor Passes: \_\_\_\_\_