

**Clatsop County Fairgrounds & Expo Center
92937 Walluski Loop
Astoria, Oregon 97103
Office: 503.325.4600 Fax 503.325.5004**

Fair Dates: Tuesday August 3, 2010 – Saturday August 7, 2010

2010 Retail Vendor Application

Thank you for your interest in the Clatsop County Fair. Please complete the application below and return to the Clatsop County Fair Board no later than April 1, 2010

COMPANY:		
DBA NAME:		
OWNERS NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
WORK PHONE:	CELL PHONE:	
CONTACT PERSON(S) IN CHARGE OF BOOTH:		
NAME:	PHONE:	
NAME:	PHONE:	

List all items that you are requesting to sell or distribute: _____

The Clatsop County Fair reserves the right to select the items a company is allowed to sell. Only approved items will be listed on the rental agreement.

ELECTRICAL REQUIREMENTS: AMPS: _____ VOLTS: _____
SPECIAL ELECTRICAL NEEDS: _____
(MAY BE ADDITIONAL COSTS TO VENDOR FOR SPECIAL ELECTRICAL NEEDS)

RETAIL VENDOR FEES:
BOOTHS WILL BE ASSIGNED BASED ON AVAILABLE SPACE

INSIDE BOOTH SPACE COST: \$250.00
BOOTH SIZE: 8 FEET DEEP X 10 FEET WIDE AND INCLUDES PIPE & DRAPE
(INCLUDES: ONE (1) 8 FOOT TABLE AND TWO (2) CHAIRS)

OUTSIDE BOOTH SPACE: \$200.00
BOOTH SPACE: 10 FEET DEEP X 10 FEET WIDE
(ONE (1) 8 FOOT TABLE AND TWO (2) CHAIRS AVAILABLE BY REQUEST)
(VENDOR TO PROVIDE OWN TENT)
\$15.00 extra per foot beyond 10 feet wide

FIRE AND HEALTH RULES & REGULATIONS

ALL CLATSOP COUNTY FAIR VENDORS MUST MEET THE OREGON STATE FIRE & HEALTH REQUIREMENTS. QUESTIONS MAY BE DIRECTED TO THE FOLLOWING AGENCIES:

OREGON STATE FIRE MARSHALL: DAVE JONES: 503.373.1540 EXT. 255
OREGON STATE HUMAN SERVICES: HAL NAUMAN: 503.325.8500

I/WE UNDERSTAND THAT ALL VENDORS WILL BE REQUIRED TO MEET ALL FIRE AND HEALTH REQUIREMENTS DURING THE CLATSOP COUNTY FAIR.

SIGNATURE _____ **DATE:** _____

ATTACH BROCHURES, PHOTOGRAPHS, DETAILED DRAWINGS OR ANY INFORMATION ABOUT YOUR PRODUCT AND BOOTH AS IT LOOKS WHILE IN OPERATION. THIS APPLICATION, ALONG WITH THE ATTACHMENTS YOU FURNISH, IS YOUR OPPORTUNITY TO PROVIDE A PROFESSIONAL AND COMPLETE PRESENTATION.

ALL PHOTOGRAPHS BECOME PROPERTY OF THE FAIR

REFERENCES: (INCLUDE FAIRS, SPECIAL EVENTS WITH CONTACT NAME & PHONE NUMBERS)

CONTACT NAME: _____ PHONE NUMBER: _____
CONTACT NAME: _____ PHONE NUMBER: _____
CONTACT NAME: _____ PHONE NUMBER: _____

ALL APPLICATIONS MUST BE RECEIVED BY NO LATER THAN APRIL 1, 2010
I UNDERSTAND THAT THIS IS AN APPLICATION ONLY AND DOES NOT GUARANTEE A SPACE IN THE CLATSOP COUNTY FAIR AND THAT I WILL BE NOTIFIED BY NO LATER THAN JUNE 1, 2010.

SIGNATURE: _____ **DATE:** _____

RETURN VENDOR APPLICATION AND SPACE FEE TO:

CLATSOP COUNTY FAIRGROUNDS
92937 Walluski Loop
ASTORIA, OR 97103

QUESTIONS & ADDITIONAL INFORMATION PLEASE CONTACT:
GARY FRIEDMAN, FAIRGROUNDS MANAGER – 503.325.4600

INTER OFFICE INFORMATION:
DATE APPLICATION WAS RECEIVED: _____
CONFIRMATION LETTER SENT: _____ VENDOR RIBBONS SENT: _____
BOOTH ASSIGNMENT: _____ BOOTH DEPOSIT: \$ _____