

Orleans County Fair Association Jan 2017

August 16-20, 2017 ~ 150th Anniversary

COMMERCIAL VENDOR CONTRACT Infield Midway

Business Name: _____ Date _____

Mailing Address: _____

Business Phone #: _____ Cell: _____ Fax: _____

Email: _____ Contact Person: _____

VT Sales/Room Tax #: _____ Type of Sales: Food ___ Non- Food ___

INFIELD MIDWAY SPACE CHARGES

Space: _____ ft. (15ft. – min. 5ft increments) Total _____ @ \$30.00 per ft _____

Electricity: # _____ 220V @ \$50 ea # _____ additional 110V at \$25 ea _____

(1) 110V will be provided with paid contract. (220V and additional 110V may be purchased)

Garbage Fee: _____ spaces @ \$25.00 _____

Camper # _____ days @ \$20.00/day- No Utilities: Camper Length _____

Camper# _____ days @ \$30.00/day- w/ Utilities: Camper Length _____

Purchase of Additional Passes~ Season: # _____ at \$30ea/Day: # _____ @ \$7ea _____

(1) Vendor Vehicle pass (2person) allowed with paid contract.

*Insurance must be provided before setup, NO EXCEPTIONS.

TOTAL: _____

1/2 DUE BY JUNE 1ST with completed Contract. BAL BY JULY 1ST

AMOUNT ENCLOSED payable to OCFA: _____

BALANCE DUE: _____

Complete this **two** page form in its entirety and send payment to:

ORLEANS COUNTY FAIR ASSOCIATION

ATTN: Kurt Nygren - Vendor Superintendent

PO BOX 580

BARTON, VT 05822

For more information contact Kurt Cell: 802-535-5942 Email: dietzdog@gmail.com

Kurt looks forward to working with you and introducing you to the incoming superintendent Dan Hinton

- 1) **ARRIVAL AND DEPARTURE:** Commercial Vendors may arrive starting August 14, 2017 between the hours of 7:00 AM & 6:00 PM. Vendors arriving after 6:00 PM will temporarily park on the left side of the infield and will be put into place the following day by the Superintendent. (No Exception) ALL VENDORS MUST BE SET UP AND READY FOR BUSINESS BY 10:00AM AUGUST 16, 2017 AND REMAIN UNTIL 6:00PM SUNDAY AUGUST 20, 2017. ANY VENDOR LEAVING PRIOR TO THAT TIME WILL NOT BE ASKED BACK.
- 2) **HOURS OF OPERATION:** All Commercial vendors will be open from 10:00am until 11:00pm DAILY unless otherwise told by the Vendor Superintendent.
- 3) **LIABILITY INSURANCE:** All Commercial Vendors must provide (before set-up) a valid liability INSURANCE POLICY in the amount of, at least, one (1) million dollars, with the O.C.F.A. named as an ADDITIONAL INSURED.
- 4) **PRIOR YEAR SPACES** are not guaranteed; every effort will be made to accommodate.
- 5) The O.C.F.A. at its sole discretion will select and assign Commercial Vendors locations and reserves the right to make changes there to. The Commercial Vendor will not share, assign, or sub-let any portion of the assigned space.
- 6) The O.C.F.A. reserves the right and retains sole authority, through its representations to resolve any disputes which may arise. The O.C.F.A. reserves the right to return any fees or (a part thereof) to the Commercial Vendor to completely discharge the obligations of the O.C.F.A. under this contract.
- 7) The Commercial Vendor agrees to comply with all Federal, State and Local rules and regulations as they pertain to activity of this type. This includes the rules and regulations of the O.C.F.A.
- 8) The Commercial Vendor agrees to hold the O.C.F.A. Harmless from any and all liability for losses, injury or damages (to persons or property) sustained on or about the leased premises. The responsibility for the leased space and its contents are expressly that of the Commercial Vendor.
- 9) **NO EXCLUSIVE RIGHTS GRANTED:** Items to be sold must be listed below: Only those items listed will be permitted. Be specific: VENDOR SUPERINTENDENT has the final decision to the limit of items sold or displayed by any Commercial Vendor.

Please list all items sold or advertised. The Vendor Manager may reserve the right to limit what items may be sold or advertised by each vendor.

This agreement is made by and between the Orleans County Fair Association, (herein known as O.C.F.A.) and _____, the Commercial Vendor, who agrees to be bound by the agreements contained herein:

Vendor Signature: -----Date: -----

OCF Rep. Signature:-----Date:-----