

Agri-Country Bluegrass Festival Jan 25-26, 2020

Commercial Space Application

512 S. Eleven Mile Corner RD. Casa Grande AZ. 85194 | 520-723-7881 | vendors@fairexecutives.com

All vendors MUST circle the type of vendor space you are applying for to be considered	Inside Outside
Submit <i>Photo of your booth in operation MUST accompany application for consideration</i>	
Liability Insurance Liability Insurance: Proof of minimum one million dollar policy in the company's name with the "Pinal County, Central Arizona Fair Association, Fair Executives, their Officers, Officials, agents, employees and representatives" listed as additional insured required upon acceptance. Exact wording must be used!	
Deposit A minimum deposit of \$50 will be required upon acceptance - balance due by December 13, 2019	

Company Name _____ **Date** _____
Contact Name _____
Phone _____ **Cell Phone** _____
Address _____
City _____ **State** _____ **Zip** _____
Email _____

	Electric Required at booth	Yes / No (circle one)	Must be completed for all applications	
Electric	Volts _____	Amps _____		
Booth Rent	Inside 10 x 10	Open front only	\$150	\$ _____
	10 x 10	Open two sides	\$200	\$ _____
	10x20	Open front only	\$300	\$ _____
	10x20	Corner	\$350	\$ _____
	Outside 10x10	10' sell side	\$150	\$ _____
	10x20	10' sell side	\$200	\$ _____
	20x10	20' sell side	\$275	\$ _____
<i>call for other space sizes</i>				
Credentials and passes	Additional Admission Credentials (valid for one admission per day):			
	(2) provided with space rent	Additional Quantity _____	x	\$10 \$ _____
	Vehicle Parking Fee (minimum of one per booth required)			\$ 10.00
	Additional parking passes	Quantity _____	x	\$10 _____
	Camping (Water & Electric)	Nights _____	x	\$25 \$ _____
	Stock Truck (No Electric)	Each _____	x	\$30 \$ _____
Stock Truck (w/Electric)	Each _____	x	\$50 \$ _____	
Golf Cart Pass	Each _____	x	\$50 \$ _____	
Insurance	All Vendors MUST have insurance. You may provide your own or purchase coverage through the event.			
	Provide your own insurance and proof of coverage check here			<input type="checkbox"/>
	Purchase the required insurance from us check here			\$120 \$ _____

Total Fee \$ _____

Signature _____

You Must complete both sides of application **MINIMUM \$50 DEPOSIT DUE UPON ACCEPTANCE**
BALANCE DUE BY December 13, 2019

Deposit Rec / Rec # _____ Date Insurance Received _____

