



2nd Annual Brunswick County Agricultural Fair & Expo Inc.
2030 Ash Little River Road, Ash, NC

Wednesday, October 21 through Sunday, October 25, 2026

Vendor Application [Rental Closes August 31, 2026]

A "Wait List" may be implemented when all spaces are claimed. If cancellations occur, we will contact those on the list.

Company Name: _____

Representative Name: _____

Phone: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Tax ID# _____ Items for Sale: _____

Fair Location: 2030 Ash Little River Road, Ash, NC

Fair Dates and Hours: Wednesday, October 21 4:00 pm – 11:00 pm

Thursday, October 22 4:00 pm – 11:00 pm

Friday, October 23 4:00 pm – 11:00 pm

Saturday, October 24 11:00 am – 11:00 pm

Sunday, October 25 11:00 am – 6:00 pm

2026 Vendor Coordinator: Marvin Reynolds Cell: 804-312-6774

Send all correspondence here: Vendors@brunswickfair.com

SPACE IS LIMITED. Please return your completed application with an entry fee. Letters of approval will be emailed. The BCAFE Inc committee reserves the right to deny any application for any reason.

RAIN OR SHINE EVENT – NO REFUNDS ONCE ACCEPTED. The governing body of the BCAFE Inc Committee reserves the right to CLOSE the Fair due to extreme weather or public safety concerns, without refund to vendors.

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APPLICATION MUST BE COMPLETED IN FULL TO BE CONSIDERED FOR THIS EVENT This application is for a 10' x 10' booth space and applies to the following exhibitors: Pre-packaged Food (food items NOT made on-site), Arts/Crafts vendors (wares must be at least 75% handmade), Non-profit Organizations (501C), commercial businesses, Food Trucks.

Items for sale: Crafts Business/Corporate/Professional Services
 Non-Profit/Community Services Educational Information/Services

Other: _____

Requested Space: 1st choice: _____, 2nd choice: _____, 3rd choice: _____

Single Booth (10'x10') - Price: \$275

Corner Booth (10'x20') - Price: \$475 (Very limited availability)

Food Truck Space - Price: \$1,400

Outside Space (20'x30') - Price: \$1,400

Additional Options:

Electricity: \$25 each circuit: \$ _____ [120v, 20 amp circuit, 2 plug receptacle]

Higher voltage may be available for an additional cost. Contact the Vendor Coordinator for special needs. Request special pricing (see Vendor Coordinator)

TOTAL Amount Enclosed \$ _____

Make Checks Payable to:

BCAFE Inc,

PO BOX 128

Shalotte, NC 28459

****RETURN CHECK FEE IS \$35**** Once approved there will be no refunds (no exceptions)

Please include with your application 2 photos of your wares and EMAIL three 4x6 landscape (not portrait) high resolution photos featuring your product and provide a description of your business or organization and a link to your website or Facebook page below. Photos are required for your application to be accepted.

Please be sure to include the best contact information, where you can be reached during the Fair.

INITIALS: _____ VENDOR APPLICATION PG: 2

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Have you been a vendor in this Fair before: [] Yes or [] No # of years: _____

Company Web address: _____

Facebook page: _____

Other Company Media: _____

Provide a brief description of your service or product (use back of form if needed):

Signature _____

Date _____

The undersigned understands that by failing to abide by the rules they may be asked to leave the Fair and no refund will be made.

CHECK OFF LIST:

_____ CHECK OR MONEY ORDER

_____ PHOTOS (EMAILED AND INCLUDED) will be used for publicity purposes

_____ APPLICATION COMPLETED

_____ LIABILITY INSURANCE CERTIFICATE FOR FAIR (ONCE APPROVED)

INITIALS: _____ [VENDOR APPLICATION PG: 3](#)

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RELEASE AND WAIVER OF LIABILITY for VENDORS

This Release and Waiver of Liability is executed this date of _____, 2026, by _____ (the "Vendor") and approved by The BCAFE Inc committee.

This Release includes the following terms:

1. Waiver and Release. I hereby release and hold harmless the BCAFE Inc and its successors and assigns from any and all liability, claims, demands, and causes of action, of whatever kind of nature, either in law or equity, which may hereafter arise from my participation and the participation of anyone working for me with the BCAFE Inc and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the BCAFE Inc.

I understand and acknowledge that this Release discharges the BCAFE Inc from any liability or claim that I may have against the BCAFE Inc, with respect to any bodily or other injury, illness, death, or property damage that may result from my participation. I also understand that the BCAFE Inc does not assume any responsibility or obligation to provide financial assistance or other assistance, including, but not limited to, medical, health, or disability insurance, in the event of injury, illness, death, or property damage.

2. Insurance. I understand that the BCAFE Inc WILL REQUIRE group accident or other liability insurance. Any coverage provided will be governed by the policy language. Except to the extent that it may provide such insurance, the BCAFE Inc does not carry or maintain any health, medical, disability, damage, or other liability insurance coverage for the benefit of its vendors and expressly disclaims any responsibility or obligation to do so. The Certificate of Insurance will include coverage for the Town of Ocean Isle Beach and the Brunswick County Chamber of Commerce.

3. Medical Treatment. Except as otherwise agreed to by the BCAFE Inc in writing, I hereby release and forever discharge the BCAFE Inc from any and all liability claims, demands, and causes of action whatsoever that may arise on account of any first aid or other medical treatment rendered during my participation with the BCAFE Inc and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the BCAFE Inc.

INITIALS: _____ [VENDOR APPLICATION PG: 4](#)

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4. Assumption of Risk. I understand that my participation with the BCAFE Inc and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the BCAFE Inc may include activities that may be hazardous to me. I further recognize and understand that such participation may involve certain

inherently dangerous activities. I hereby expressly and specifically assume the risk of injury or harm in the activities and release the BCAFE Inc from all liability for injury, illness, death, and/or property damage that may result.

5. Photography/Audio Release. I do hereby grant and convey unto the BCAFE Inc rights, titles, and interest in and to any and all photographic images and video or audio recordings made by or on behalf the BCAFE Inc, or made with its consent, during my

participation in the BCAFE Inc and/or any project, activity or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with the BCAFE Inc, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. You agree to allow the BCAFE Inc to use photos, videos on social media, print media, websites and billboards, and all cross-media marketing.

6. Other. I expressly understand and agree that this Release is intended to be as broad and inclusive as permitted by law, and that this Release shall be governed by and interpreted in accordance with the laws of this state, county, city and/or township. I agree that if any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release. By signing below, I acknowledge that I have read and understand this Release and agree to its provisions.

Company Name:

Print Representative Name:

Signature of Participant/Vendor _____

Date _____