2017 VOLUSIA COUNTY FAIR & YOUTH SHOW APPLICATION FOR VENDOR SPACE

November 2 - November 12, 2017

NEW APPLICANTS ARE I	REQUIRED TO SEND	PHOTO OF DISPLA	Y SET UP WITH	APPLICATION.	
NAME OF BUSINESS:					
CONTACT NAME:		FID#			
ADDRESS:					
CITY:	s	TATE:	ZIP:		
PHONE: ()	(CELL: ()			
EMAIL:					
ALTERNATE CONTACT N	IAME & PHONE #:				
TYPE OF EXHIBIT:	FOOD SALES	DIRECT SAL	ESI	NON-PROFIT	
PRODUCT: PLEASE LIST	ITEMS YOU WOULD LIK	E TO SELL OR DISPL	AY:		
IF SELLING, PLEASE GIVE I	PRICE RANGE: FROM \$	TO \$			
DO YOU PREFER INDOOR_	OR OUTDOO	DREXHI	BIT SPACE? HO	W MANY?	
INDOOR SPACES ARE 8 st Indoor includes electric.					
REFERENCES: HOW MANY YEARS HAS YO	OUR BUSINESS BEEN IN	OPERATION?			
PLEASE LIST FAIRS/FESTIV	'ALS YOU HAVE BEEN A	SSOCIATED WITH:			
1)CONTACT PERSON WITH	PHONE #				
2)CONTACT PERSON WITH	PHONE #				
THIS IS AN APPLICATION APPLICATION. IF A CON' THIS APPLICATION DOE	TRACT IS OFFERED, I	DEPOSITS ARE IMM			
Vendors are required to pr combined single limit for b			irrence and \$2,0	000,000.00 annual ag	gregate
SIGNATURE OF APPLICANT PLEASE RETURN YOUR CO		I TO:	DATE SUE	BMITTED:	
E-MAIL: office@volusiacount					

E-MAIL: office@volusiacountyfair.com or Fax: 386-734-717
VOLUSIA COUNTY FAIR
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DELAND, FL 32724