## BOONE COUNTY FAIR NEW CONCESSIONAIRE/VENDOR APPLICATION

Return to: Boone County Fair Association c/o Concessions Committee

**P.O. Box 471** Belvidere, IL 61008

Office: 815-544-	4066 Fax: 815-544-80	27 E-mail: bcfconcjh@aol.com
Company Name:		
Contact Name:		Date Signed:
Address:		City:
Zip Code:	E-mail:	State
Phone:	Cell:	
Products to be sold	or displayed:	
Electric: 20 Outside: (Spaces are	amps included with each	itional space in 5' increments.)
Amount of space n	eeded: Frontage Ft	X Depth
Tent Rental: Tent	Size: x	(See brochure for sizes)
Electric: Outside: N	lumber of amps needed -	110 amps or 220: amps
On the back	please list any other fairs or s	similar events you have worked.
Enclose a snap	shot of your booth or sketch o	of your proposed booth structure.
Include	any miscellaneous information	on you feel we should have.

NOTE: UPON APPROVAL, A FULL CONTRACT WILL BE SENT.
RETURN CONTRACT WITH COPY OF CERTIFICATE OF INSURANCE

Other Fairs of Similar events you've worked