

NORTH GEORGIA STATE FAIR



North Georgia State Fair
 September 23 - October 3, 2010
 www.northgeorgiastatefair.com

Attn: **Tod Miller**
 Phone: **770-423-1330**
 Fax: **770-293-0047**

This space for use by FAIR Management only
 Booth Space (Inside / Outside) Size _____
 Deposit Pd/Date: _____ Balance _____
 Electrical Requirements _____
 Admission Tickets _____ Parking Passes _____
 Comments _____

IMPORTANT: A description or photo of your display unit or stand **MUST** accompany this application! If available, please include a brochure or catalog along with your description

NOTE: This is an application for space. **THIS APPLICATION DOES NOT GUARANTEE SPACE.** If your application is accepted, you will receive a notice in the mail of acceptance.

Phone: _____ Cell: _____ Fax: _____

Applicants Name: _____ Title: _____
 Company Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Website Address: _____ Email: _____

Size of space requested: _____ Price of Space: _____ Total Amount Enclosed _____

Booth Rates: (minimum 10 ft. required)
 Inside Space = \$40.00 per front foot
 Outside Space = \$35.00 per front foot
 Food/Drink Concession = 20% of Gross Sales and \$100.00 Deposit

- Enclosed is my check for 50% of the total cost. (A minimum of 50% is due in order to reserve your booth space for **NEW** vendors).
- Enclosed is my \$100.00 deposit. (Must be received before December 31st to retain space).
- Enclosed is total amount owed
- Yes, I would like to be included on the Fair's Insurance policy (\$100.00)

Electrical requirements _____
 (please note there may be an additional fee for certain electrical needs beyond the provided 120 Volt (20amp))

If your application is accepted, you will be sent a Vendor information kit with additional pertinent information in early August.

MAKE CHECK PAYABLE TO:
NORTH GEORGIA STATE FAIR
 P.O. Box 777
 Kennesaw, GA 30156

List all products and/or services that you will be selling/displaying at the Fair. Also, please include the prices for your products and/or services. You will be processed on the basis of this application. Once confirmation of acceptance is issued, you may not substitute or add items without approval. Violations may mean cancellation of contracts and forfeiture of monies paid.

Please list the products and/or services you wish to exhibit: _____

Each vendor shall obtain and keep in force until completion of the fair, including clean up and tear down, a commercial general liability insurance contract with liability limits equal to or greater than **\$1,000,000 each occurrence**. The contractor shall provide a certificate of insurance to the Cobb County Fair Association evidencing such coverage. Such vendor shall name Cobb County Fair Association as an **Additional Insured**. If you currently do not have this coverage, you can be added to the fair's policy for \$100.00 (see Insurance Request Form).

Contractor shall be solely responsible for any and all injuries to persons or damages of property or any other injury, claim, damage or loss of whatever nature, arising directly or indirectly from their "operation." Contractor shall **INDEMNIFY, SAVE AND HOLD HARMLESS** Cobb County Fair Association, Cobb County Government, JRM Management Services, Inc and it's employees, agents and volunteers from and against all liability, loss, damages, claims, costs and expenses (including attorney fees) arising out of injury to person or damages to property or any other injury, claim, damage, loss, cost or expense arising from their "operation."

APPLICANT'S SIGNATURE _____ DATE SUBMITTED: _____

2010 EXHIBITORS APPLICATION