



MARICOPA COUNTY FAIR

April 10th-14th, 2019
 1826 W. McDowell Road, Phoenix, AZ 85007
 (602) 252-0717 - FAX (602) 252-4279

COMMERCIAL VENDOR SPACE APPLICATION

OFFICE USE ONLY	
Cash / Check / M.O.	
Amount pd:	_____
Check#	_____
Receipt#	_____
Date:	_____

COMPANY NAME: _____ **CONTACT:** _____

PHONE: _____

ADDRESS: _____ **EMAIL:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

NOTE: Entire product/price list must be listed on back of this application. No application will be accepted unless a complete list is included.

Booth Info	INSIDE	10'x10'Corner	@ \$450 each	\$ _____
		10'x10' In-line	@ \$350 each	\$ _____
		Continuous spaces, in line	@ \$250 each	\$ _____
	You must purchase a corner or inline space to receive this discount			
	OUTSIDE	10'x10'	@ \$550 each	\$ _____
		If larger than 10'x10' Call for price		
Parking	ADDITIONAL AUTO PARKING: 1 provided free with space rent			
		On-Site Parking Permit(s)	_____ @ \$ 10 each	\$ _____
		Grandstand Parking Permit(s)	_____ @ \$ 50 each	\$ _____
Please indicate if your vehicle is a dually.				
Tickets	ADDITIONAL CREDENTIALS: 2 provided free with space rent			
		Daily	_____ @ \$ 5 each	\$ _____
		Seasonal	_____ @ \$ 15 each	\$ _____
RV	RV PARKING SPACE: 1 grandstand parking permit included per RV space			
		RV Space	_____ @ \$200 each	\$ _____
	RV Size Required: Length _____ Width _____ (include extensions/slide outs)			
Please indicate if your vehicle is a dually.				
Stock Truck	STOCK TRUCK PARKING:			
		Space no power	_____ @ \$ 75 each	\$ _____
		Space with power	_____ @ \$125 each	\$ _____
	Truck size Required: Length _____ Width _____			
Electric requirements: Volts _____ Amps _____				
Golf Cart	GOLF CART PERMIT: Certificate of Insurance required			
		Cart Permit	_____ @ \$50 each	\$ _____
	INSURANCE:	Certificate of Group Insurance	\$120	\$ _____
				TOTAL DUE \$ _____
				LESS DEPOSIT (minimum \$100) \$ _____
				BALANCE DUE BY MARCH 8, 2019: \$ _____

***Applications will not be considered unless filled out completely and accompanied by a deposit and current photo of booth. All fees must be paid by cashier's check, money order or cash. Acceptance of application does not guarantee space. No refunds unless not accepted. All deposits will be deposited and refunded if you are not accepted as a vendor.**

FORMER EXHIBITOR? Yes No If previous exhibitor, when? _____

If you have not exhibited at the Maricopa County Fair in the past two years, please list references from other fairs or exhibitions you have worked. Include name of event, date, contact name and telephone (use additional paper if needed):

All contracted concessionaires are required to provide product and general liability certificates of insurance for \$1 million prior to setup. Workman's Compensation insurance is required for those not self-owned and operated.

Over **APPLICANT'S SIGNATURE:** _____ **Date** _____

