



10TH ANNUAL VERNON STREET FAIR

Sponsored by the Vernon Chamber of Commerce

Exhibitor Application www.vernonchamber.com

Saturday, September 7th, 2024

11am-3pm

Main Street in Vernon's Town Center

Organization: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Please provide a brief description of the type of products or services you wish to promote or sell:

Interested in sponsoring? _____ YES _____ NO

Booth/Space Options

Category	Fee	Choose One Option
Non-Member	\$50.00	
Chamber Member	\$40.00	
Non-Profit	\$25.00	

Please Note:

- After setting up—Shuttle buses are available and parking instructions will be emailed with set-up instructions. Look for instructions approximately one week in advance.
- Only ONE vendor per booth.
- Booth size approx. 10X12 or 10'x24'(double size & price)
- Reservations are non-refundable and non-shareable, regardless of weather
- Event will take place rain or shine
- No spaces will be reserved without full payment
- Space is limited, first come-first served basis
- Booth placement is determined by event coordinators
- All Exhibitors must provide their own tables, wagons and tents
- Exhibitors must be set up between 9:00-10:30am. PLEASE DO NOT BREAK DOWN UNTIL 3PM.
- All Exhibitors must dispose of their own garbage.
- All Exhibitors must follow town fire & health regulations & apply

Authorization: As an authorized agent of Exhibitor, my signature attests that I have read, understood and agree to the Exhibitor Guidelines included in this application. Exhibitor agrees to hold harmless the Vernon Chamber of Commerce, its affiliates, subsidiaries, members, directors, officers and agents from and against any claim, and any losses associated with the Vernon Street Fair. ***As it applies to my participation, I agree to abide by the Center for Disease Control (CDC)'s recommendations for the prevention of the spread of COVID-19 and attest to having read the CDC's guidance at: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html>. I also agree to abide by any COVID-19 distancing and other safety guidelines issued by the state or the community.***

Signature: _____ Date: _____

Please make check payable to: Vernon Chamber of Commerce • Mail to: Vernon Chamber of Commerce, PO Box 308, Vernon, NJ 07462 • info@vernonchamber.com

FOR INTERNAL USE ONLY:

Payment Method: Cash _____; Check _____ (Check Number _____); Online _____ Amount Paid _____