

## The Genesee County Fair July 20th - 27th 2024

## **COMMERCIAL VENDOR CONTRACT**

Company Name to be listed:		NYS Tax ID No.:	
Contact Person:			
Address:			
Town/City:		State:Zip Code:	
Phone Number:	Fax:Em	ail Address:	
	Website:		
Please list the goods, ser	rvices, attractions you will be exhibi-	ting:	
Please list any special co	onditions:		
Inc	door Space	Outdoor Space	
Spaces are	10ft. X 10ft. for \$100	Spaces are sold in frontage Increments.	
J.	v electric receptacle is included. d: X \$100 = \$	Spaces are sold in frontage Increments. Each frontage foot is \$10 (Minimum of 10 frontage feet)	
# of spaces requested	uX \$100 - \$	Front footage: X \$10/front ft. = \$	
Non-Profits ple	ase contact us for pricing	Please specify depth needed:	
SPACE ALLOCA	ATIONS ARE AT THE DISCRETION OF	FAIR MANAGEMENT AND ARE NOT NEGOTIABLE	
	Camping	Available	
Tents (NO hook-ups) - \$75X \$75 = \$		# of spaces requested:X \$75 = \$	
21ft. & Under (Includes basic water and electric) - \$250 # of spaces requested:X \$250 = \$		# of spaces requested:X \$250 = \$	
Over 21ft. (Includes basic water and electric) - \$300 # of spaces requested:X \$300 = \$			
	Performan	ce Deposit	
All exhibitors are requ close of Fair on Sat	uired to submit a performance de turday if your booth remains inta surrenders the per	eposit of <b><u>\$100.00</u></b> which will be returned to you at the ct until 10pm. Anyone who leaves before this time formance deposit.	
Subtotal of above cor	ntract fees: \$	Please mail contract & payment to:	
Performance Fee: \$100.00		Rose Topolski	
		8 Wilson St. LeRoy, NY 14482	
Total DUE NOW:	\$	Questions??? (585) 356-9051 or rtopolski@me.com MAKE CHECK PAYABLE TO GCAS	
E	xhibitor Name (Printed):		
Signature of Exhibitor:		Date:	

COMMERCIAL VENDOR CHECKLIST:			
All items should be sent to the Fair as soon as possible, and <b>must</b> be received prior to set-up.			
Signed Contract			
All Fees including Performance Deposit			
Rules and Regulations Acknowledgement (Contract is not valid unless acknowledgement is signed)			
Tax ID Number			
Certificate of Insurance naming Genesee County Agricultural Society & Genesee County Fair as additionally insured			
Workers' Compensation Form			
Retain a copy of the contract and all documents for your records			
Any questions or concerns may be addressed by calling Rose Topolski at (585) 356-9051 or by e-mail at rtopolski@me.com We look forward to working with you. See you at the Fair!			
Commercial Vendor Rules and Regulations Acknowledgement :			
In order to become a Commercial Vendor at The Genesee County Fair you must sign below acknowledging that you have read the Rules & Regulations. <u>The Rules &amp; Regulations can be found online on the homepage</u> of www.gcfair.com To request a printed copy, please email rtopolski@me.com or call 585-356-9051.			
By signing below, I agree to the following (Please initial on each line)			
I have received a copy of the "Commercial Vendor/Food Vendor Rules & Regulations			
I have read and understand each and every Rule and Regulation			
I declare that I will comply with all of the Rules and Regulations			
Company/Business Name:			
Exhibitor Name:			
Signature:			

Please mail this form along with payment and insurance info to:

Rose Topolski 8 Wilson St. LeRoy, NY 14482 MAKE CHECK PAYABLE TO GCAS