CARBON COUNTY FAIR

August 4-9, 2025

FOOD REGISTRATION FORM (Includes candy)

Please fill in all fields.	Upon completion, print, sign and mail to the payment address provided
below.	

Please type or print c	learly Please check ($$ one) \square Non-profit \square Profit
Name of organization of	or business
Contact person	
Street address	
City/State	Zip code
Telephone	Email address
Items you will be displa	aying or selling
Allow room around y 1. Total size of area re 2. # vendor passes nee 3. Size of covered dini 4. Vendor Insurance, i 5. Carbonated beverag Add lines 1, 2, 3, 4 and Please indicate your e	5' depth. Please note a minimum of 15' depth is required for all frontage. our stand for servicing and customers. quested ft frontage x ft depth = sq ft x \$2.25/sq ft = \$ ded (30 supplied) Additional passes \$3.50 each x = \$ ing area ft x ft = sq ft x \$0.50 sq ft = \$ f supplied by CCLLFA insurance carrier @ \$85.00 \$ ie fee (\$25.00) - required if selling carbonated beverage \$ 15 and remit payment with registration form TOTAL \$ dectrical needs110 220 VERAGESYesNo
	wn by February 27, 2025. Balance due by July 1, 2025. Site will not be held
	vendors must provide certificate of insurance, naming Carbon County
	al \$85.00 postmarked by July 1, 2025. NO EXCEPTIONS!
Make checks payable t	o: <u>CCLLFA</u> Bob Silliman, Vendor Chairperson 250 Lentz Trail Jim Thorpe, PA 18229
	ey order must accompany registration form! Money order only after July 1, 2025.
	ase call 570-657-7129.
All returned checks w	ill be charged a \$25.00 fee. No refunds after June 1, 2025.

I agree to abide by all rules and regulations of the Carbon County Fair and accept all responsibility for my rented vendor space, product and/or services provided. I further agree to hold Carbon County Fair, its' board of directors, officers and volunteers free from any and all liability.

Signature _____

FOR OFFICE USE ONLY						
Initial Payment \$ Check # Final Payment \$ Check #	Date postmarked					
Insurance certificate	Purchase Insurance Paid in full	☐ Sales Tax ID number ☐ Ad ☐ Packet mailed	lditional passes			