

Pend Oreille County Fair Informational Booth Application

2025

Questions, contact: Sarah Thibodeau at pocfairvendor@yahoo.com

Organization or Business Name _____

Contact Person _____ Phone/Cell _____

Mailing Address _____

Email _____

Business ID _____

Vendor's Insurance Company Enclosed

List products/information you plan to distribute (Attach an additional page if necessary)

Booth size: ___ Single ___ Double ___ Triple

Booth location: ___ Indoors Electrical Needed: ___ None

___ Outdoors ___ 110

___ 220 Total Amps needed _____

___ 10' x 10' without power: \$75.00 each

___ 10' x 10' with power: \$90.00 each

Includes 2 passes

Includes 2 passes

Double includes 4 passes

Double includes 4 passes

Amount enclosed: _____ Check number: _____ Receipt Number _____

Enclosed is the fee required for the requested booth space(s). The undersigned, on behalf of the organization or individual(s) named above, agree to abide by the terms of the Pend Oreille County Fair Concession Booth Policy. Proof of liability insurance is required for all vendors before setup.

Make Checks payable to: Pend Oreille County Fair

Mail to: Pend Oreille Co. Fair

Attention: Sarah Thibodeau

331288 HWY 2

Newport WA, 99156

509-589-0982

Signature _____

Date _____