

NORTH EAST WASHINGTON FAIR
August 23 – 26, 2018
RESERVATION FORM (By Invitation Only)
Box 282 Colville, WA 99114
(509) 684 - 2585

PLEASE PRINT CLEARLY :

Name of Organization: _____

Contact Person: _____

Mailing Address: _____

Daytime Phone: _____ Cell: _____ Other: _____

Type of Booth: Retail Food Other: _____

Prices: 10' x 10' Without power: \$75.00 10' X 10' With power: \$150.00

Concession Wagons: Size: \$250.00 - Includes: 3 Passes only

Booth Size: Single Double Triple Power Needed: Yes No Gate

passes: 3 per space; not to exceed 6—additional may be purchased for \$3.00 each. Description of

Booth: _____

PLEASE ENCLOSE PHOTO OF BOOTH IF POSSIBLE

ENCLOSE COPY OF INSURANCE WITH THIS FORM

Local Health Permit: Yes No To obtain, call: Environmental Health (509) 684-2262

ALL EXHIBITORS WILL:

- Set up on Wednesday by 9:00 p.m.
- Operate the entire 4 (four) days from 9:00 a.m. to 8:00 p.m. Minimum, EXCEPT Sunday until 4:00 p.m.
- Tear down to be completed on Sunday
- NO Animals
- NO Camping allowed at your booth space
- All support vehicles must be out of fairgrounds by 9:00 a.m. daily

Concession Building Food Booth:

- Single Space \$200 3 Passes
- Double Space \$275 6 Passes
- Triple Space \$475 9 Passes

Additional passes may be purchased for \$3.00 each. See front page for all other information requirements.

Organization agrees to defend, indemnify, and hold harmless to the fullest extent permitted by law, Stevens County from any and all claims, losses and liabilities arising from, resulting from or in connection with the use of the County facility by the organization, it's agents, employees, volunteers, or subcontractors, even though such may prove to be false, groundless or fraudulent. Maintain a comprehensive General Liability insurance policy issued on an Occurrence Basis with limits of Liability of \$1,000,000 per Occurrence and \$2,000,000 Aggregate during the scheduled event including move-in and move-out. Organization will provide Stevens County a Certificate of Insurance adding Stevens County "Additional Insured" at the time of signing contract and will provide a copy of the policy and endorsements upon request.

I/We have read the above and agree to comply with all terms and conditions as set forth herein, and agree that failure to comply will result in the closure of my booth at the NE WA Fair with no refund of any fees paid.

BY: _____ Title: _____ Date: _____

By NE WA Fairgrounds Director: _____ Date: _____