

<http://www.applecountryfair.com>

- WHEN:** Saturday, October 6, 2018 (rain or shine) from 10:00 a.m. to 4:00 p.m.
- WHERE:** Brookfield Town Common (RAIN OR SHINE)
- FEE:** \$200.00. This fee is **NONREFUNDABLE** upon acceptance to the fair.
- DEADLINE:** 'APPLE-CATIONS' are accepted until the week of the fair or until all spaces are rented (whichever comes first). Applicants will be notified on a first-come, first-served basis.

REQUIREMENTS:

1. Brookfield Board of Health Temporary Food Permit is included in this fee. BoH inspection will be at 8:00 a.m. the day of the fair.
2. A copy of your ServSafe® Food Handler certification.
3. You must provide utensils and napkins and trash receptacles.
4. Electricity is not available.
5. Please provide a sample menu with prices.
6. A color photographs of your setup will be required if you have not displayed at our fair in the previous two years (2015 or 2016). These will not be returned.
7. Notifications will be sent via email unless you include a self-addressed stamped envelope (SASE) for USPS mailing of notification.
8. All Food vendors will be responsible for providing their own neat and attractive setups, including rain cover in case of inclement weather.
9. \$200 per space. Please detach the bottom part of this application and return it with your check made payable to:

*The Brookfield Community Club
PO Box K312
Brookfield, MA 01506.*

INFORMATION: applecountryfair@gmail.com or (774) 757-0166

PERMISSABLE ITEMS: Preference will be given to local food vendors. Vendors will be accepted on a first-come-first-served basis, taking into consideration that we offer a variety of food options. We suggest you provide a few specialty items rather than an extensive menu with numerous items for sale. If your application lists a food item that is already being provided by another vendor, you may be asked to substitute another item. Preference will be given to vendors in the order they are received. Vendors must display clear and concise menus with prices and a sign with your business name.

Contact Name: _____ Telephone: _____
Name of Business: _____
Mailing Address: _____
Type of Food: _____
Vehicle Make & Model: _____ License Plate: _____
Email address: _____

I understand that the Brookfield Community Club is not responsible for loss or damage of my work, personal property, or personal injury. I also understand that I am responsible to provide my own setup, tables, chairs, displays, and rain cover.

Signature: _____ Date: _____