

Lake Country Community Fest

~ Produced by the Hartland Chamber of Commerce & the Delafield Chamber of Commerce ~

Saturday, March 14, 2020

Kettle Moraine High School

10:00 am – 3:00 pm

Food Vendor Registration Form

Business Name: _____

(Please list business name exactly how it is to appear on all publications, promotions, signs and web site.)

Contact: _____ Phone: (____) _____

Address: _____

City: _____ State: _____ Zip: _____

Email (required for follow up contact): _____

Website (required for hyperlink posting on Fest website): _____

I am a member of: Hartland Chamber ____ Delafield Chamber ____ Both ____ Neither ____

REMINDER: Please review "Additional Notes" on Exhibitor Information form for restricted items.

Visit www.lakecountrycommunityfest.com to view booth layout and make choices. Final confirmations/updates will be sent to the email address listed above **approximately 2 weeks prior to the event**. Assigned booths may be available for viewing on website prior to formal confirmation. **Vendors must submit a copy of insurance certificate showing coverage is active at least thru March 14, 2020.** Number of participating vendors will be limited to 5-6 and vendors will retain the sales from food items. In order to avoid duplication, all food item menus will be pre-approved by the Committee. List food items to be sold:

Chamber of Commerce Member	\$150.00	
Non-Chamber Members	\$300.00	
Non-Profit –Member Only (Limited space available)	\$100.00	

TOTAL of Check _____

_____ Yes, electricity required. (Bring your own grounded, 3-prong extension cord.)

Mail form with payment: Must be received by **Saturday, February 15, 2020.**

Make checks payable to: Lake Country Community Fest
Mail to: LCCF c/o Delafield Chamber of Commerce
P.O. Box 180171
Delafield, WI 53018

We will do our best to accommodate your requests. Booth assignments are based on a first come, first serve basis. Register early to secure a booth position that fits your company/organizations needs. Payment must be made at the time of registration and booths WILL NOT be assigned until paid in full.

FOR OFFICE USE ONLY: Date received: _____ Check # _____