



P.O. Box 524, Walden, New York 12586
email: waldencommunitycouncil@yahoo.com
www.waldencommunitycouncil.org
www.villageofwalden.org

Walden Harvest Fest Vendor Application Form – October 1, 2011 (Rain Date – October 2, 2011 – 1:00PM)

Information:

1. Set up is 6:30 AM to 8:00 AM. **After discharge, all vehicles must be removed. No vehicles can be in the Square after 8:00 AM. Vendors must park in the Oak Street parking lot. Transportation to the Square will be provided.**
2. Exhibitors must provide their own tables, display boards, etc. No electrical outlets are available.
3. Walden Harvest Fest Committee or the Village of Walden will not be held responsible or liable for any damages of any kind to exhibitors, their displays or any injury caused during the show, including set up and removal of display.
4. Space will be assigned on a first come, first served basis upon receipt of the completed application.
5. Space size for exhibitors will be a 10' X 10" area. If your exhibit space needs to be larger, please plan accordingly by reserving more than one space. Extra space will not be available the day of the Harvest Fest. If you utilize a generator, please indicate in the space provided on the attached Vendor Application Form.
6. No silly string or exploding poppers are to be sold.
7. Vendor is responsible for the removal of all garbage.
8. Booths may not be taken down until after 5:00 PM, **there will be no vehicles allowed in the square.**
9. There will be limited emergency access from Walnut Street during the day.
10. You will receive your Booth number via e-mail or phone call.
11. **Food Vendors are Responsible for all permits required. Contact the Orange County Health Department (845) 291-2331**
12. If you would like to advertise in the Wallkill Valley Times Harvest Fest Publication, call Sandy at 845-527-9483.

BOOTHS ALLOTTED ON FIRST COME / FIRST SERVED BASIS

FEES: Non refundable

VENDOR FEES

\$60.00 Additional Booth space \$50.00

Contact Persons: Debbie Robb - (845) 706-1570

NOT FOR PROFIT

\$25.00

Date sent _____ Check # _____ \$ Amount _____

Keep this for your information

A Partnership of Business and Community

Walden Harvest Fest
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(Rain Date – October 2, 2011 – 1:00PM)

Contact Person: _____ Title: _____ Phone # _____

Exhibitor's Name: _____ Phone # _____

Address: _____

E-mail: _____

Please provide a brief description of your Business/Organization and/or type of item(s) being sold for vendor classification:

Crafts _____

Jewelry _____

Non-profit _____

Business _____

****Food** _____

Other _____

Do you have any special needs that we need to be aware of to assist you with? If yes, please list below:

My display requires the use of a Generator YES NO

**** Food Vendors need to contact Orange County Board of Health (845) 291-2331 for a permit**

I cannot attend but would like to make a donation to be used for the purchase of prizes and/or giveaways. Your name will be listed with the items as a sponsor. You may make a monetary donation or donate a specific item or a business gift card.

Please list your donation: _____

Signature _____ Date _____

Make checks payable to: Walden Community Council

Mail application & check to: Walden Community Council
P. O. Box 524
Walden, NY 12586
email: waldencommunitycouncil@yahoo.com
www.waldencommunitycouncil.org
www.villageofwalden.org

Date received _____ Check # _____ Amount \$ _____

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