



# Bethel Summerfest

## Saturday, July 20, 2024

### 10am – 4pm

### On the Bethel Town Common

## Non-profit Vendor Application

### Rules for all non-profit vendors:

- Summerfest is a **rain or shine** event.
- This is a **non-smoking** event
- Vendors **must** staff their booths from 10am-4pm, unless severe weather becomes a factor.
- **Set-up times:** Friday, July 19, 4-7pm (NO overnight security available) or Saturday, July 20, 7-10am.
- **All spaces** are 14' x 14' (10' tent plus 2' clearance on each end).
- Tables and chairs are **NOT** provided.
- Designated boundaries of any space may NOT be changed.
- Pets must be on leash and waste removed.
- **\$10 fee for all cancellations before June 28<sup>th</sup>.**
- **No refunds after June 28<sup>th</sup>,** unless the Chamber cancels this event for any reason, we will then offer a full refund.
- In the event of postponement due to severe weather and/or emergency declaration we will try our best to apply vendor fees to a future event.

Business/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Website/Facebook: \_\_\_\_\_

### Vendor Description

- I'm a **RETURNING** non-profit organization from the 2023 Bethel Summerfest. Returning Vendors will receive priority placement **if you submit your application by May 1st.**
- I'm a **NEW** non-profit organization at Bethel Summerfest.

**New Vendors:** Please describe your organization.

\_\_\_\_\_  
\_\_\_\_\_

Do you need electricity? Yes \_\_\_\_\_ No \_\_\_\_\_

### 2 Choices for Non-Profits

- FREE SPACE** - for groups offering a family or kids' activity (limited to 1 free space per organization).

\_\_\_\_\_ Yes, I want (1) 14' x 14' **FREE** space on the common to hold a family/kids' activity = 

\$ 0
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- I understand that I will have to pay for a second space, if needed.

*Continue on next page*

Please describe the family-oriented activity you plan to have in your space.

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2. **PAID SPACE** - for groups offering information & outreach about their own organization  
**OR** for groups needing a 2<sup>nd</sup> space for an activity (first space is free).

\_\_\_\_\_ Yes, I want a 14' x 14' space to offer information.

\_\_\_\_\_ Yes, I want a 2<sup>nd</sup> space for the family activity.

Number of spaces \_\_\_\_\_ x \$60 = 

\$
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**Preferred Set up Time:** Friday, July 19, 4-7pm \_\_\_\_\_ **OR** Saturday, July 20, 7-10am \_\_\_\_\_

### Payment Information

\_\_\_\_\_ I have enclosed a check or money order (Made payable to Bethel Area Chamber of Commerce)

\_\_\_\_\_ Please charge my credit card (Visa, MasterCard, Discover, American Express):

Name on card \_\_\_\_\_

Card number \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_

Security code on back \_\_\_\_\_

**Billing Address:** (if different than above mailing address)

Business/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Waiver of Liability:** In consideration of the acceptance of this application, the exhibitor agrees that any and all items shall be displayed at the sole risk of said exhibitor, and said exhibitor shall be responsible for his or her activities and those of his or her agents or employees, and shall hold the Bethel Area Chamber of Commerce and Town of Bethel harmless from any and all claims for damages or injuries to persons or properties which may arise at Bethel Summerfest, July 20, 2024. Said exhibitor also agrees to remain set up for the duration of the event, from 10am – 4pm, unless weather conditions warrant early departure.

**I agree to abide by the terms of this contract:**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**You will receive confirmation of your space, details, and a layout map by June 28<sup>th</sup>.**

*Please keep a copy for your records.*

**Return application, payment and any photos to:**

Bethel Area Chamber of Commerce

P.O. Box 1247

Bethel ME 04217

Phone: (207) 824-2282

Fax: (207) 824-7123

[john@bethelmaine.com](mailto:john@bethelmaine.com)

**OFFICE USE ONLY:** Date Received \_\_\_\_\_ Payment Amount \$ \_\_\_\_\_ Check # \_\_\_\_\_ Booth #(s) \_\_\_\_\_