

**Vendor Application
Lycoming County Fair
Holiday Crafter/ Vendor Market**

Business/Organization Name _____

Contact Person: _____

Address: _____

Phone: _____

Items to be sold: _____

Number of spots: (aprox. 12'x12') _____ X \$25 per spot

Signature: _____

**By signing above I acknowledge that I have read, understand, and will comply with the requirements of this activity sponsored by the Lycoming County Fair 150th Celebration Committee.
See Direction Sheet for details and mailing information.**

For Office Use Only

Payment Received: _____ by _____ for \$ _____

Check # _____

All payments are nonrefundable unless event is cancelled. This will be an outside event held rain or shine.