LYCOMING COUNTY FAIR ASSOCIATION
P. 0. Box 116 • 1 East Park Street • Hughesville, PA 17737-0116

Phone (570) 584-2196 • Fax (570) 584-4955 • Email - concessions@lycomingfair.net

FAIR DATES: July 8-18, 2026

2026 - OUTSIDE CONCESSION RESERVATION REQUEST - 2026

RESERVATION FORM MUST BE RETURNED
WITH DEPOSIT TO OUR OFFICE BY MAY 15, 2026 TO GUARANTEE SPECIFIC LOCATIONS.

-RATES- PER FOOT FRONTAGE $20.00

(1) Reserve same space for us. ___ yes ___no _____Size of space. (Please specify footage - frontage and depth. Frontage must be in 5' increments)

(2) Name of items or food to be sold: _____

_____

We enclose a DEPOSIT of $_____ apply on our rental with the understanding that same is to be refunded if reservation is cancelled no later than May 15, 2026.

MINIMUM DEPOSIT: $100.00 (Make check payable to: Lycoming County Fair).

SPACE RESERVATIONS WILL ONLY BE HELD UNTIL 12:00 NOON, JULY 8, 2026, UNLESS CONCESSIONS AGENT HAS GRANTED PERMISSION FOR LATE ARRIVAL.

Any trailer or unit occupied for sleeping quarters will be charged $25.00 per day. Any type unit using electrical hook-up prior to and during fair will be charged accordingly. Payment for the duration must be paid on day of arrival at the main office.

If applying for liability insurance on fair policy, add $100.00.

ALL UNPAID CONCESSION RENTAL MUST BE PAID AT THE OFFICE NO LATER THAN MONDAY, JULY 13, 2026. AFTER JULY 13, 2026, AN ADDITIONAL 10% WILL *APPLY.*

-LCFA USE ONLY -

RENT _____
ELECTRIC _____
WATER _____
INSURANCE _____
TOTAL _____
LESS DEPOSIT _____
BALANCE DUE _____

PLEASE PRINT:

NAME_____ DATE_____

STREET _____

CITY _____ STATE _____ ZIP _____

PHONE#_____ EMAIL_____

ALL CONCESSIONAIRES AND COMMERCIAL EXHIBITORS ARE REQUIRED TO CARRY LIABILITY INSURANCE AND PROVIDE THE LYCOMING COUNTY FAIR ASSOCIATION WITH A CERTIFICATE OF INSURANCE LISTING THE LYCOMING COUNTY FAIR ASSOCIATION AS AN ADDITIONAL INSURED $1,000,000.00 MINIMUM.

Complete/correct application, provide Certificate of Insurance (as detailed above) or apply for liability insurance on fair policy, make deposit (at a minimum) if not done previously.

I have read and thoroughly understand the enclosed rules and regulations and will comply with said requirements.

Signature:_____ Print Name:_____

MAIL TO: Lycoming County Fair, Attn: Rich Heydenreich, PO Box 116, Hughesville PA 17737
(your cancelled check is your receipt)