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**A dba company of the Hotchkiss Community Chamber of Commerce**

Hotchkiss Holiday Fair Application

**The Hotchkiss Holiday Fair will be held at Memorial Hall in Hotchkiss on Friday & Saturday, November 17th & 18th** and will serve as an outlet for local artists, crafters, and other businesses to offer their goods for sale to the public. Proceeds will go to Memorial Hall

Friday hours will be 11am – 3pm and Saturday hours will be 9am – 3pm.

Cost for booth space will be $30 per 8’ wide space. One table and two chairs will be provided with the cost of each space. Number of spaces per vendor will be limited to two. Set up will begin at 9am on Friday. **Vendors will be expected to remain set up and open for business during the full two-day span of the Holiday Fair – no early packing up.**

Pats Bar and Grill will be selling Chili and Vegetarian from 11:00-1:00 on Saturday 11/18

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business/Organization Name, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sales Tax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Vendor is responsible for collecting and submitting sales tax)

Choose number of spaces @ $30 each space: \_\_\_\_\_ (maximum of 2 spaces per vendor) Indicate if power is needed by checking here: \_\_\_\_\_ (very limited and not guaranteed)

* Spots will be assigned first come first serve if you have any questions or requests contact hotchkisschamber@gmail.com or Anne Ziemer 970-730-3507

**Make checks payable to: HCCC and mail to the same at: PO Box 158, Hotchkiss, CO 81419.**

By my signature I agree to abide by the rules of Memorial Hall, The Hotchkiss Community Chamber of Commerce, and the Delta County Health Department. Should the Chamber or Health Department feel it necessary to implement any protocols to protect the health and safety of vendors and the public, I agree to abide by any such requirements or forfeit my fees and/or rights to participate in the event. Should the event be cancelled for any reason beyond the control of the vendor, all fees will be returned. I agree to hold harmless the parties regarding any loss, damage, or liability. If I must cancel for any reason after payment of fees, my fees will not be refunded unless the space(s) I reserved are rented to another vendor.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_