



**2021 COMMUNITY SERVICE VENDOR CONTRACT
August 7-14, 2021**

Return the **COMPLETED, DATED AND SIGNED** contract with appropriate forms, including a check made payable to the “New Jersey State Fair” for 50% of the contract amount by March 1, 2021 to reserve a space. Balance and insurance is due June 1, 2021. You will receive a signed copy of this contract and invoice confirming your acceptance.

Balance is due is June 1, 2021 - Late fee of \$100 will apply.

BUSINESS NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____

STATE: _____ **ZIP:** _____

TELEPHONE: (____) _____ **CELL PHONE:** (____) _____

EMAIL: _____

NON-PROFIT TAX EXEMPT NUMBER: _____

COMMUNITY SERVICES TENT: Size and location of the tent is to be determined by the number of Community Service Vendors accepted. Each ten foot space will include an eight foot table with two chairs. The cost is \$200.00 for the entire ten days for a 10’ x 10’ space.

NUMBER OF SPACES _____ **PRICE:** \$ _____

INSURANCE: Vendors shall obtain and maintain public liability insurance for loss, damage to rented property and personal injury arising from their operations. Insurance Certificate must name the NJSF/SCF&HS Association as an Additional Insured.

_____ I would like to purchase insurance from the fair for \$150.00. **PRICE:** \$ _____

_____ I will provide liability insurance naming the NJSF/SCF&HS as an ‘Additional Insured’ by June 1, 2021. If not received by June 1, 2021, I will be charged \$150 to be put on the fair’s policy.

NO EXCEPTIONS!

CAMP SITE: Flat fee of \$35.00/night Number of nights _____ PRICE: \$ _____

NEW VENDOR DEPOSIT (SEE NEW VENDOR APPLICATION) PRICE: \$100.00

TOTAL: \$ _____

CREDIT CARD:

Please circle type: American Express Visa MasterCard Discover

Card #: _____ Expiration date: _____

Security code: (found on back of card; front if Amex) _____

Name on card (please print): _____

I have read and agree to all contract stipulations as noted in the New Jersey State Fair® / Sussex County Farm & Horse Show Association Vendor Handbook. All final location assignments are at the discretion of the Concessions Committee. Incomplete contracts will be returned.

***** Covid protocols for vendors will follow as soon as we get guidelines from the state. Due to Covid, The New Jersey State Fair, reserves the right to make any necessary changes for the safety of all involved.*

Signed _____ Date _____
 VENDOR

Signed _____ Date _____
 NJSF

Please return contract to: New Jersey State Fair
 Attention: Concessions Manager
 PO Box 2456
 Branchville, NJ 07826

concessions@njstatefair.org
 973-948-5500 x225
 973-948-0147 fax