



## Vendor Application July 23-August 1, 2020

Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Exhibit Purpose (Products or services to be displayed or sold): \_\_\_\_\_

\_\_\_\_\_

Electrical Requirements (*include volts and amps needed*): \_\_\_\_\_

Space Requirements: \_\_\_\_\_

Type of space desired:  Inside Space  Outside Space

Check One:  Commercial  Concession  Trade Midway

❖ **Please include a photo of your booth.**

❖ **Food vendors please attach a copy of your menu.**

Return to:

Champaign County Fair

PO Box 544

Urbana, IL 61803

(217) 367-8461

office@champaigncountyfair.cc