



Quadtoberfest

Food Vendor Information

The Park Falls and Phillips Chambers welcome you to join us this year as a food or specialty vendor for this year's first Quadtoberfest.

Quadtoberfest will take place at the Price County Fair Grounds located at N9130 Forest Ln, Phillips, WI 54555 and will begin on Friday, **October 2nd** and continue through Sunday, **October 4th, 2020**.

The Chambers are looking to include local and non local vendors. We would like to be able to offer our Quadtoberfest participants a wide variety of foods such as sandwiches, entrees, pizza, ethnic favorites, desserts and specialty items. At this time the Chambers do not anticipate that we will be serving food. BUT we reserve the right to participate should the need require to get a proper number of choices for the guests.

If you are interested in participating, please provide us with a full menu of items available for sale. Also, include the size of booth or area that you would like. Please be specific to food items in fairness to all sellers. Our intention is to allow a large variety of foods and exclusivity will **not** be granted. Therefore, menu duplication is possible.

****A "Certificate of Insurance" is required for all food vendors****

The cost of a booth is as follows:

Primary Vendor – Full menu to include Meat Entrees along with other items etc.
\$200.00

Secondary Vendors/ Specialty Vendors (No Limit) – Item specific, Specialty and Novelty items, no meat entrees allowed etc.

\$100.00

Hook-ups are extra and are as follows:

110V - \$ 100.00

220V - \$ 100.00

ONLY THE CHAMBER STAND WILL BE ALLOWED TO SERVE BEER, MALT BEVERAGES AND BOTTLED WATER. YOU MUST CHOOSE OTHER BEVERAGES SUCH AS MILK, COFFEE, SODA OR HOT COCOA.

Thank you in advance for your consideration. Information may be sent to: Park Falls Area Chamber of Commerce, 400 4th Avenue S., Park Falls, WI 54552 or Phillips Chamber of Commerce, 305 S Lake Ave, Phillips, WI 54555. The deadline for review of materials and full booth fee is **August 6th, 2020**. Both the Park Falls and Phillips Chamber reserve the right to accept or reject any vendors. Accepted vendors will be notified by email or phone.

If you have any questions or concerns, please do not hesitate to contact the Park Falls Chamber office at 715-762-2703 or the Phillips Chamber office at 719-339-4100.

Thank you. Park Falls Area Chamber of Commerce
400 4th Ave. S, Park Falls, WI. 54552
715-762-2703

Email: director@parkfalls.com
www.parkfalls.com

Phillips Chamber of Commerce
305 S Lake Ave, Phillips, WI 54555
715-339-4100

Email: chamber@phillipswisconsin.net
www.phillipswisconsin.net

Quadtoberfest

October 2nd - October 4th, 2020

Food Vendor Contract

Name _____
Name of Booth or Organization _____
Address _____
City/State/Zip _____
Phone Number _____ Email Address _____
Food to be sold (be specific & include all items to be sold) _____

ONLY THE CHAMBER WILL BE ALLOWED TO SELL BEER,

Food vendor booth fees are for all three days, Friday through Sunday; RAIN, SNOW, OR SHINE. Vendors are responsible for proper disposal of their waste (dumpsters will be provided at the site). **Booths must not be removed until 3 PM on October 4th, 2020**
Set-up for the Food Court is Friday, October 2nd, 2020 at 10 AM.

PRIMARY VENDORS (Those with Meat entrees, full menu, etc.)

\$200.00







SECONDARY/ SPECIALTY VENDORS (Those with menus that have non-meat items.)

\$100.00

PLEASE ADD HOOK-UP CHARGES AS FOLLOWS:

_____ 110V - \$100.00

_____ 220V - \$100.00 - Please circle wire type below:

_____ 30 amp	3 Wire:			4 Wire:	
_____ 50 amp	3 Wire:			4 Wire:	

Total Payment: \$ _____ * A "CERTIFICATE OF INSURANCE" IS REQUIRED*

Please return this application with your full payment by **August 6th, 2020 to be considered** for a food vendor spot at Quadtoberfest. Please make checks payable to: **Park Falls Area Chamber of Commerce, 400 4th Avenue South, Park Falls, WI 54552 or Phillips Chamber, 305 S Lake Ave, Philips, WI 54555. No refunds after August 27th, 2020.** Please call PFACC at 877-762-2703 or PCOC at 715-339-4100 if you have any questions or visit www.parkfalls.com or www.phillipswisconsin.net

Vendors found to be violating any of the rules or policies will be given one warning; should non-compliance persist, both the Park Falls Chamber and Phillips Chamber reserve the right to order the vendor off the Quadtoberfest premises without refund of fees.

I hereby agree to abide by the rules and policies attached to this agreement.

Signed _____ Date _____

Wisconsin Temporary Event Operator and Seller Information

Information on this form is required under sec. 73.03(38), Wis. Stats.

Instructions on reverse side.

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PART A: Event Information: To be completed by the operator of the temporary event

1. Name of Temporary Event Quadtoberfest
2. Date(s) of Temporary Event **October 2nd—October 4th, 2020**
3. Location of Temporary Event (e.g., Venue, City) Price County Fair Grounds, Phillips, WI

PART B: Operator Information: To be completed by the operator of the temporary event

1. Name and Address PARK FALLS AREA CHAMBER OF COMMERCE
400 S. 4TH AVE., PARK FALLS, WI 54552
2. Daytime Telephone Number (715) 762-2703
3. Email Address director@parkfalls.com
4. Wisconsin Tax Account Number 4 5 6 - 0 0 0 0 2 0 7 4 9 2 - 0 2
If blank, check appropriate box:
 No Taxable Sales Exempt under Occasional Sales Rule Exempt Nonprofit Organization
 Other – Explain: _____

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PART C: Seller Information: To be completed by seller and given to event operator on or before the first day of event.

THIS IS NOT AN APPLICATION FOR A WISCONSIN TAX ACCOUNT – SEE INSTRUCTIONS

1. Legal Name _____
2. Business Name _____
3. Address (Street or Route) _____
4. City, State and Zip Code _____
5. Home Telephone Number () _____
Business Telephone Number () _____
6. Wisconsin Tax Account Number _____ - _____ - _____
7. Social Security Number X X X - X X - _____
8. Federal Identification Number (FEIN) X X - X X X _____
9. Check one box indicating the type of activity you intend to engage in at this event:
 Selling Taxable Merchandise or Service Display Only
 Selling Exempt Merchandise or Service Exempt under Occasional Sales Rule
 Direct Sellers, Company Name _____ Nonprofit Organization

I declare that the information on this form is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.

Print Name: _____

Signature: _____ Date: _____

Information about temporary events, including forms, instructions and Common Questions can be found on the Department of Revenue's website at revenue.wi.gov/html/temevent.html. If you have additional questions, please contact the Department of Revenue by email at DORBusinessTax@revenue.wi.gov or telephone at (608) 266-2776. See reverse side for submission instructions.

**** Do not email event reports to maintain confidentiality of seller information ****