



## 2019 Application for the Market Place Fair

Trade Name or Parent Company: \_\_\_\_\_

Your Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ Website: \_\_\_\_\_

Do you have a canopy? \_\_\_\_yes \_\_\_\_no Do you plan to use a generator? \_\_\_\_yes \_\_\_\_no

**Fees: Please make checks payable to: Little Falls Area Chamber of Commerce  
Visa or MasterCard payments may be made by phone (320-632-5155)**

Non-refundable Application Fee: \$ 10.00

City of Little Falls License Fee: per location (not space) \$ 15.00

**EARLY BIRD SPECIAL**

Payments and application received before May 31, 2019 +\$ \_\_\_\_\_

**\$205.00 per space [for 1<sup>st</sup> and 2<sup>nd</sup> space(s)]**

Payments and applications received after May 31, 2019

**\$255.00 for 1<sup>st</sup> space and \$205.00 for 2<sup>nd</sup> space** +\$ \_\_\_\_\_

\$ 110 per space for 3<sup>rd</sup> and beyond on the same location +\$ \_\_\_\_\_

Total # of spaces desired \_\_\_\_\_

TOTAL AMOUNT OF PAYMENT = \$ \_\_\_\_\_

### Minnesota Sales Tax Permit Information

Name \_\_\_\_\_ Permit # \_\_\_\_\_

**ALL APPLICANTS MUST INCLUDE A COMPLETED AND SIGNED ST-19 FORM EVERY YEAR  
(WHETHER YOU COLLECT SALES TAX OR NOT)**

MDA Mobile Food Handlers License Number # \_\_\_\_\_

**(This is required for all processed and packaged food vendors)**

\_\_\_\_ By signing this document I am stating that all information provided in this application is correct and that I have read the 2019 Rules & Regulations document and agree to abide by its content.

\_\_\_\_ I will conduct my self in a professional manner with respect to my neighbors, volunteers, customers, and the Chamber of Commerce staff. I fully understand that if the officials of the 2019 Arts & Craft Fair find fault with my product or conduct, I will correct it or leave without refund.

\_\_\_\_ I agree to indemnify and hold harmless the Little Falls Chamber of Commerce and its employees, volunteers, City of Little Falls, and private property owners from any loss or liability that may arise as a result from my entry in the Fair.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**To ensure your entry, return this completed and signed application postmarked by March 31, 2019 (returning vendors) or May 31, 2019 (new vendors) to Little Falls Area Chamber of Commerce, 200 First St NW, Little Falls, MN 56345 or via electronic mail to [artsandcrafts@littlefallsmnchamber.com](mailto:artsandcrafts@littlefallsmnchamber.com) and call for payment (320) 632-5155**