

Eagle River Area Chamber of Commerce Cranberry Fest Farmer's Market & Antique/Vintage Show October 5, 2024 - Downtown Eagle River, Wisconsin Application Form

Vendor Information:

Vendor Name:			
Business Name:			
Mailing Address:			
City:	State:	Zip Code:	
Phone Number:	Email Address: _		
Website:	Facebook Page:		
Space Size: The space available to each Street (no longer on the side streets.) F	·		dle of Wall
Number of (12'x12') stalls reque	ested: Total c	ost:	-
Permits/Liability Insurance Information	<u>ı</u> :		
 All exhibitors are required to have to participate. You may obtain of Inheritance & Excise Tax Division https://www.revenue.wi.gov/TaxFootnamer 	one by contacting the Wisc n, P.O. Box 892, Madison, W	consin Dept. of Revenue, Income, VI 53708 or call (608) 266-2776.	
Wisconsin Seller's Permit Number (15 digit	ts starting with 456):		
Social Security Number: (Provide last 4 di	igits if you do not have a Wisco	onsin Seller's Permit Number):	
If the vendor does not have a Wisconsi exemption code provided by the vendo	or.	•	er the
 Exempt sales only or display only Multi-level marketing company pay 	3 - Nonprofit oc ys sales tax 4 - Exempt occa		
 All exhibitors are required to has show with our office in order to 		te of General Liability Insurance	during the
Items being sold - Check all Product Types	s/Vendor Type:		
Produce Meat/Fish D Prepared Food Cut Flowers _ Other:	Antiques Items	_ Vintage items	Herbs
The products I will offer for sale will inclu	ude (be specific and includ	e all products, please include pho	otos):

Vendors must sell only Antique/ Vintage items or Farmer's Market goods including fruits, vegetables, plants, flowers, meats, jams, jellies, honey, syrup, prepared and baked goods, fresh eggs, etc. <u>Crafts will not be accepted as part of our downtown Farmer's Market</u>. Please contact the Chamber for a crafter application for a booth at the Vilas County Fairgrounds.

I hereby accept the rules and regulat & Antique/Vintage Show:	tions regarding my pai	ticipation in the 2024 Cran	berry Fest Farmer's Market	
(Signature of Seller/Participant)		(Date)		
Please remember, in order to particip submit this application form with a September 1, 2024.	•			
Method of Payment (Please make	payable to the Eagle	River Chamber of Comm	erce):	
Check	_ Money Order	Credit Card	Cash	
Credit Card Number:		Expiration Date:	CVC#:	
Signature:		Date:	Zip Code:	
Print Name Listed on Card:				
P.O.	please send your app e River Area Chambe Box 1917 e River, WI 54521			

Thank you for being part of Cranberry Fest in downtown Eagle River. If you have any questions, please contact Kathy Holperin at 715 477-2227 (store) or 715 891-1409 (cell) or by email at grandmastoybox12@gmail.com

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