

**42nd Budweiser Dairyland Super National Truck and Tractor Pull, Tomah WI.
June 22-25th, 2017
Flea Market, Business and Arts & Crafts Vendors**

Location: Tomah Recreation Park/Grandstand Side Physical Location: 1625 Butts Ave., Tomah WI 54660
Mailing Address: P. O. Box 908, Tomah, WI 54660
PHONE: 608-372-2081 (business hours) - After hours call: 239-389-4628 or 608-378-4388
FAX: 608-372-1052 (please call to verify we received FAX)
EMAIL: mail@tomahtractorpull.com Website: www.tomahtractorpull.com
Approximate Attendance: 60,000 - 70,000

- 1) Open Pavilion: \$3.00/frontage ft. This building is open on 3 sides, has a cement floor & electricity available for an extra charge. We do not provide extension cords, tables or chairs. The booth space is 10' deep.
- 2) Open air outside booths: \$4.00/frontage ft. for units up to 30', \$6.50/frontage ft. for booths over 30'. Electricity is limited & available for an extra charge. The booth space is 18' deep. We do not provide ext. cords, tables or chairs.
- 3) Inside Gold Building: \$8.00/ft. Booths are 10' & 12' frontage, 8' deep, (electricity is available for add'l. chg.) End booth exposure, if available, is an additional \$10.00. We do not provide extension cords, tables or chairs. Map & Booth numbers mailed/emailed prior to event.
- 4) Premium Midway frontage: \$150.00/10' x 10' space. No Vehicles allowed. Must be set up by 4 pm on Thursday.

Payment: Must be returned with this form in the form of a check or money order. Your cancelled check is your receipt. ***We will accept reservations until we are full on a first come first served basis. Thank you!***

Make your check or money order payable to: MCAS **PLEASE PRINT** **TRACTOR PULL**

Return By: May 29th, 2017 **Mail to:** Monroe Co. Ag. Society, **Attn:** Vendor Secretary
After June 4th: **\$10.00 Late Fee** P.O. Box 908, Tomah, WI 54660

By completing this contract, I am agreeing to the terms and conditions as set forth by the Monroe County Agricultural Society in the attached Vendor Manual.

Printed Name: _____ Signature _____
Name _____ Telephone/Cell _____
Business Name _____ Email Address: _____
Mailing Address _____ City _____ State _____ Zip _____

Type of Merchandise sold (Circle one: Art & Craft, Flea Market, Antique, Farm-type, Retail, Buy/Sell)

(Please explain what kind merchandise you have in your booth - needed for advertising)

Sales Tax Form Enclosed _____ Payment Enclosed _____ Insurance Enclosed _____
_____ Email _____ Please mail packet _____ Hold packet, pick up upon arrival _____ Same area as last year

Open Pavilion - Covered Outside	# of Feet _____	x \$3.00 = \$ _____
Open Outside Booth under 30'	# of Feet _____	x \$4.00 = \$ _____
Open Outside Booth over 30'	# of Feet _____	x \$6.50 = \$ _____
Premium Midway Space 10'x10',	# of spaces _____	x 150.00= \$ _____
Inside Gold Bldg. (10' X 8')	# of booths _____	x \$80.00= \$ _____
Inside Gold Bldg. (12' X 8')	# of booths _____	x \$96.00= \$ _____
Inside Gold Bldg. End Exposure if Avail.	# of booths _____	x \$10.00= \$ _____
Insurance through event w/ MCAS	\$100.00	= \$ _____
Electricity (1 per space)	\$5.00 each space	= \$ _____
Late Fee (after May 29 th)	\$10.00	= \$ _____
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	Total Enclosed	\$ _____