

# Exhibitor Registration Form

Please provide a brief description of your products (attach separate sheet of paper if necessary.) **MUST BE COMPLETED**

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[www.spoonbreadfestival.com](http://www.spoonbreadfestival.com)

Booth spaces are 12qx 12q Any area used beyond the 12qx 12qspace limit will result in an additional fee. **The application fee is non-refundable.**

			Booth Fee
Chamber Member:	Single Booth	\$75.00 Add \$15 after Aug. 1st	_____
	Double Booth	\$140.00 Add \$30 after Aug. 1st	_____
Non-Chamber Member: (Craft & Information Booths)	Single Booth	\$100.00 Add \$20 after Aug. 1st	_____
	Double Booth	\$190.00 Add \$40 after Aug. 1st	_____
Commercial Vendor:	Single Booth	\$175.00 Add \$25 after Aug. 1st	_____
	Double Booth	\$325.00 Add \$50 after Aug. 1st	_____
Electricity (extremely limited)		\$20.00	
Total Amperage: <b>*amps</b> _____ <b>Required</b>			
Formula: Amperage = Wattage divided by Voltage (Electricity add \$20.00)			_____
(110) <b>*#amps</b> _____ (220) <b>*#amps</b> _____			
<b>Total:</b>			_____

**Registration & Liability:** I understand that the Berea Chamber of Commerce, the Spoonbread Festival, the City of Berea and any person acting on their behalf will not be held responsible for any loss, damage or personal injury of any kind. I also understand that all tax and legal responsibility is that of the seller. Consequently, I am responsible for filing my own sales tax forms. I have read the rules and regulations and agree to comply with those provisions, as witnessed by my signature:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Email: \_\_\_\_\_ Web Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zp: \_\_\_\_\_

Please return completed **application, product/booth photos** (new exhibitors only), your **amperage requirements** and a **check** made payable to: **Spoonbread Festival**

Mail to: Berea Chamber of Commerce  
 204 N. Broadway, Suite 1  
 Berea, KY 40403  
 Phone: (859) 986-9760  
 E-mail: [chamber@bereachamber.com](mailto:chamber@bereachamber.com)

**Office Use Only**

Date Received: \_\_\_\_\_

Selection Committee Approval:

YES \_\_\_\_\_

NO \_\_\_\_\_

Check Number: \_\_\_\_\_

Amount Paid: \_\_\_\_\_