



EXHIBITOR CONTRACT

SATURDAY, MARCH 23rd 11am to 4pm

REQUIRED: All applications **MUST** be accompanied by insurance documents and fee. Applications without insurance and/or fee **WILL NOT BE ACCEPTED.**

DEADLINE: Applications, insurance documents, and fee must be received by Friday, March 14, 2019. Applications/insurance received after that date may be rejected.

EXHIBITOR INFORMATION

Organization/Company Name: _____

Contact Name: _____

Phone: _____ Cell: _____

Address: _____

City _____ State: _____ Zip: _____

Facebook _____ Twitter: _____

Email: _____ Website: _____

EXHIBITOR BENEFITS: Exhibitors receive one 10' x 10' exhibit space, a six foot table, and two chairs. Paid Exhibitors also receive a Facebook post, Tweet, name and your link on the Zero Waste Faire website if all materials are received by 3/9/19. Below, please indicate how many exhibit spaces you would like at the festival. Applications accepted on a space-available basis. Wilton Go Green reserves the right to reject any application. Electricity is limited and may be available upon request.

Food vendors and exhibitors with food samples and/or food sales: Temporary Health Permit required. Application must be submitted to the Wilton Health Department by March 8, 2019. For additional information, visit the Wilton Health Department by clicking **HERE**.

FEES: (Please circle or make BOLD your category)

- Commissions, Boards, and Wilton Public Schools: Donation encouraged!
- Local, Environmental non-profit, educational: Donation encouraged!
- \$100 Single person business/sole proprietor—no part-time employees
- \$150 Business/Non-profit: 2–3 Full-time/part-time employees
- \$250 Private School
- \$250 Business: 4–5 Full-time/part-time employees
- \$250 Car Dealership
- \$500 Business: 6+ Full-time/part-time employees

Ten word description(for Social Media use): _____

I would like to contribute to the Silent Auction. Each item must be valued at \$25 or greater.

Item _____ Value: \$ _____

Item _____ Value: \$ _____

I would like to contribute product(s) to the Drawing. Each item must be valued at \$25 or greater.

Item _____ Value: \$ _____

I would like to contribute to the Zero Waste Store. Donors may provide display materials.

Item _____ Value: \$ _____

PAYMENT INFORMATION: Please make checks payable to: **Wilton Go Green, Inc.**

Total payment due: \$ _____ Payment by Credit Card: #: _____

3 digit code: _____ Exp. Date: _____ Zip Code: _____

Completed application, payment and insurance documents, must all be submitted together and may be e-mailed to cduncan4@optonline.net or mailed to WGG, ZWF, P.O. Box 7652, Wilton, CT 06897 or, fax to: 845-858-7823