



Event Sponsored By:



In Partnership With:



Saturday, August 27, 2022

8:30 am - 1:00 pm

(Rain Date: Sep. 24, 2022)

Exhibiting Company Information: Please print clearly

Name of Presenting Company			
Mailing Address			Contact Person
City	St	Zip	E-mail Address
Phone	Fax	Exact Wording for Booth Signage	
<p>1. Please read and complete this application and return to the Midstate Chamber of Commerce with your payment in full to reserve your space. <i>Note that a percentage of the Chamber's net revenue from this event will be donated to the Farmer's Market!</i></p> <p>2. Your Vendor Packet will be sent prior to the event.</p>			

Choose your Option Below

- Sponsor(s) — MEMBERS ONLY! Prime Space & Promotion & Tent Included ***\$500** **(4 available)**
- Exhibitor Space—MEMBERS **\$200**
- Exhibitor Space—NON-PROFIT MEMBERS & ARTISTS **\$135**
- Exhibitor Space—NON-MEMBERS **\$475—includes one year of chamber membership**

*Promotion: On-site with signage, pre-event press releases, social media promotion, ads in Record-Journal, Chamber promotion. ALSO: all Chamber event vendors will have an opportunity to record an onsite 30-60 second "commercial" video.

Electricity is not available at this event.

Space is 10 x 10 and you must provide your own tent

TOTAL Amount Due _____

****Tent MUST BE WEIGHTED DOWN—STAKING INTO THE GREEN IS **NOT** PERMITTED****

Fees include: 10x10 space; 8' Table; 2 Chairs; Exhibitor ID Signage
Setup begins at 7:30 a.m.—Vendors must be setup and ready for an 8:30 a.m. start

Please indicate what you will be exhibiting at your space:

Please return this reservation form with your payment to: The Midstate Chamber of Commerce, Inc.

546 So. Broad St., Suite 2C, Meriden, CT 06450 info@midstatechamber.com 203-235-7901 / fax 203-686-0172 www.midstatechamber.com

ACCEPTANCE: I agree to abide by all guidelines, specification, rules and regulations governing the Midstate Chamber of Commerce and to the terms and conditions of payment. All cancellations must be in writing by August 15, 2022. All initial deposits are non-refundable. Please sign below.

Signature:	Title	Date
Printed Name of Signer	Company Name	
<input type="checkbox"/> Bill us <input type="checkbox"/> Credit Card (AX, Disc., VISA, MC) # _____		
Exp. Date: _____	Zip Code of Card _____	Card Verification # _____

Visit www.midstatechamber.com for events, member news, resources and more!