**COMMERCIAL EXHIBIT SPACE**

**OBION COUNTY FAIR**

**1711 E. Church Street**

**P.O. Box 126**

**Union City, Tennessee 38281**

**(731) 885 - 5361**

[**www.obioncountyfair.net**](http://www.obioncountyfair.net/)[**bbaker@obioncountyfair.net**](mailto:bbaker@obioncountyfair.net)

Please reserve the following space for our exhibit at the Obion County Fair during the week of August 20 - 25, 2018.

\_\_\_\_\_\_Booth Space: 16 feet wide x 8 feet deep in the Commercial Exhibit Building, $200.00   
Includes 120 volt electrical outlet. Exhibitor parking will be in the reserved parking lot in front of the main entrance on Church Street. Includes two Commercial Exhibitor tickets.

\_\_\_\_\_\_Outside Space: \_\_\_\_\_front feet X \_\_\_\_\_ feet deep, $ 2.50 per front foot, with a minimum charge of $100.00. Exhibitor parking will be in the reserved parking lot in front of the main entrance on Church Street. Includes one Commercial Exhibitor ticket for each outside space rental.

\_\_\_\_\_\_Number of additional Commercial Exhibitor passes needed - Additional Commercial Exhibitor passes may be purchased in advance for $30.00 each until Sunday, August 19th. These passes will not include rides. No passes will be issued after August 19th.

\_\_\_\_\_\_ Place a check here if your business would like to sell items from your booth. All requests for sales will be pre-approved by the Board of Directors.

\_\_\_\_\_\_ Place a check here if your business will be set up for display only.

**ALL SPACES MUST BE PAID BEFORE SET-UP.**

Booth space is assigned. Booths must be in place by 5 P.M. on Monday, August 20, 2018.

Security will be provided beginning on Monday, August 20th at 7 A.M. and will continue until Sunday, August 26th at 7 A.M. The Obion County Fair Association will not be responsible for loss or damage of exhibits, displays, and/or equipment. Booths may be removed AFTER 10 P.M. on Saturday, August 25, 2018.

Name of Business \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address and Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Liability Insurance Carrier \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Policy Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Liability Insurance Carrier \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_