

**South Shore Summer Fest
Featuring Classified.
Vendor Application Form**

Event Date: August 2, 2025

Location: Shelburne County Exhibition Grounds.

SPACE IS LIMITED MAKE US AN OFFER.

OFFER AMOUNT: \$

APPLICATION DEADLINE: July 10, 2025

Please email completed applications to **lhtfesociety@gmail.com**

Subject Line: Vendor Application – [Your Business Name]

Business Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

Type of Vendor (check all that apply):

- Food Truck
- Hot Food Tent
- Packaged Food
- Merchandise / Artisan Goods
- Info Booth / Community Group
- Other (please specify): _____

Brief Description of Your Booth or Offerings:

Booth Setup Requirements:

- Power (please specify amps: ____)
- Water Access
- Tent Needed
- I am self-contained (e.g. food truck)
- Other needs (please specify): _____

Permit Information:

Food vendors must hold a valid Temporary Food Permit and meet all health and fire safety regulations. All vendors must provide proof of insurance upon approval.

Will you be providing proof of insurance?

Yes No (you may be required to sign a waiver)

Booth Fee Structure (One-Day Event – August 2, 2025):

- **Tier 1: Full Food Truck / Hot Food Vendor**
Suitable for vendors preparing and serving hot food on-site.
Access to basic utilities (e.g. power, water, waste) **may be available**—further details to follow.
Vendors must meet all health and fire regulations.
- **Tier 2: Packaged Food Vendor / Cold Snacks & Drinks** –
Suitable for booths selling prepackaged food or cold items with **minimal setup**.
Utility access is **limited and not guaranteed**.
- **Tier 3: Artisan / Merchandise Vendor** –
For craft, retail, or merchandise booths.
Power access **may be available upon request**.
- **Tier 4: Nonprofit / Community Group – Free (limited availability)**
Booth space provided. **Tent, table, and booth setup not included**.
Must apply for pre-approval. Space is limited.

Vendors will be notified of approval by **July 15, 2025**.

Website (if applicable): _____

Social Media Link (if applicable): _____

Online Store or Product Page (if applicable): _____

Optional Question:

Do you identify as a member of a historically marginalized group or equity-seeking community?

(Optional)

Yes No Prefer not to say

Signature: _____

Date: _____