

Fair Grove Heritage Reunion 2027
September 25 & 26, 2027
Craft and Food Booth Application

Business Name: _____

Owner Name: _____

Address: _____ City, State, Zip _____

E-mail: _____ Phone Number: _____

Description of products: What you would like printed in program book, 15 words or less.

Returning Vendors:

To reserve same booth application must be
postmarked prior to November 1, 2026

Same Booth:

Would like to move to:

ALL APPLICATIONS MUST BE RECEIVED BY MAY 1, 2027

Number of Craft Booths Needed: _____

Booth Fee \$130.00 \$ _____

(Limit of 2 booths per new vendor)

Number of Food Booths Needed: _____

Booth Fee \$195.00 \$ _____

(Any Booth that requires contacting Greene Co Health Department)

(Fee is per 10', if trailer is longer, please include correct fee)

Electric (20-amp electric very limited availability. Electric fee will be
returned if electric is not available, first come-first serve basis)

\$30.00 \$ _____

TOTAL ENCLOSED \$ _____

THE FOLLOWING MUST BE INCLUDED WITH APPLICATION:

- Check payable to Fair Grove Historical Society.
- Photo of your products, which will not be returned to you.

Reunion Use Only

Postmark Date: _____

CK #: _____

Total \$: _____

Conf. E-Mailed: _____

Booth Assigned: _____

By submitting this application to the Fair Grove Historical Society, the undersigned acknowledges receiving, reading and fully understand all of the Guidelines and Regulation of the 2027 Fair Grove Heritage Reunion. I understand that submission of this application, with the required attachments and fees does not guarantee admission to the festival as a vendor. I further understand that if I violate any of the Guidelines and Regulations I may be excluded or asked to leave the Event. My merchandise (in sole or in part) may be excluded or rejected from the Heritage Reunion and booth rental fees, electric and additional parking fees will be forfeited.

Signature: _____

Date: _____

Mail application to: PO Box 93, Fair Grove, MO 65648

