



SUGAR MOUND ARTS AND CRAFTS

202* INFO SHEET

CONTACT INFORMATION

MAILING ADDRESS:

Sugar Mound Arts and Crafts
P.O. Box 128
Mound City, KS 66056

PHONE: 913-795-7500**EMAIL:** sugarmoundartsandcrafts.smac@gmail.com**WEBSITE:** www.sugarmoundartsandcrafts.com

FESTIVAL INFORMATION

DATE: October 1st & 1st 2021**TIME:** Sat. - 9am to 6pm *and* Sun - 9am to 4pm**LOCATION:** Linn County Fairgrounds
8476 Kansas Hwy 7
Mound City, Ks 66056

VENDOR INFORMATION

FEE: Booth fee is \$150.00 per booth and due with the application.**BOOTHS:**

- Inside booths are 10ft. wide and 8ft. deep.
- Outside booths are 10ft. by 10ft.
- Limit of two spaces per vendor except for the Sunflower Barn, Blue Barn and Outside. A maximum of 3 spaces will be available in those 3 areas. *Please indicate your preference.*
- Entries are accepted on a first-come, first-serve basis.
- All merchandise must be contained within your assigned booth space.

ELECTRICITY: There is very limited electricity available for inside booths. Only two (2) spotlights per vendor will be allowed. Power cords must be at least 12-gauge to comply with county fire codes. *There is no electricity available for outside booths.***VENDOR PACKETS:** All packets must include ***completed application, signed vendor contract and payment.*****STATE TAX:** Each vendor is responsible for paying Kansas sales tax. Forms are available on the State of Kansas web site.**APPLICATION DEADLINE:** September 20th, 2021**REFUNDS:** No refunds will be given for cancellations after September 1, 2021**CAMPING INFORMATION:** The cost of camping will be \$25.00 per night. Camping will be paid when you check in. A space will be assigned at that time. *No prepaid camping.*



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202* VENDOR APPLICATION

OCTOBER 1ST AND 1ST, 202*

Please print legibly in blue or black ink

Name

Phone Number

Street Address

City

State

Zip Code

Each booth space is \$150, maximum number of booths is three.

Inside Booth (10 x 8)

Outside Booth (10 x 10)

Number of Booths Requested: _____

Are you a returning vendor: YES NO

If so, indicate which barn you were in last year: _____

Please list all items you plan to sell:

Right of Refusal:

The Festival Board reserves the right to refuse or deny any application for any reason. Any vendor violating the terms of the application and/or vendor contract will be asked and required to leave the festival.

Release and Waiver of Claim:

I agree that the Sugar Mound Arts and Crafts, Inc. and the Linn County Fair Association are in no way responsible or liable for damage or loss of any kind to my personal property or self during the festival on October 10th and 11th, 2026. I understand that if I leave the festival early, I forfeit my 2027 right of entry.

Applicant Signature

Date

Office Use Only

Date Received: _____ Amount and Check No: _____



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VENDOR CONTRACT

OCTOBER 1ST AND 1^{2TH}, 202*

I agree to adhere to the conditions that are stated in the application and vendor contract.

All vendors must have their application submitted by September 20, 202*

Booth assignments are final, changing spaces or moving to a different location *is not* permitted.

- I understand that I will not be permitted to display or sell items with profanity or inappropriate gestures.
- I understand that pets ARE NOT permitted in booth spaces.
- I understand that firearms are not permitted in buildings or booth spaces and that violating this rule will result in being required to leave the show.
- I understand that this is a two-day event, and I agree to participate for the duration of the show.
- I understand that I am to be set up and ready to sell by 9am on Saturday October 1st until the show ends on Sunday October 1st at 4pm.
- I understand that I must have my booth disassembled and ready to load and have been permitted by the barn chairman to retrieve my vehicle for loading.
- I understand that the exit procedure is in place to ensure the safety of everyone and failing to adhere to directions may void my entry into future shows.
- I understand that all Federal, State, and Local laws governing retail sales tax must be followed and I will comply.

By signing this form, I agree to the terms of this vendor agreement and the application.

Signature

Date

Applicant Printed Name