

Mitchell Fair –Registration for Concession Aug 31 to Sep 2, 2018

Complete and enclose 1/2 of the full fee by June 30, 2018 to hold your spot.

Balance of the full fee due Aug 31, 2018

payable to the Mitchell Agricultural Society, Box 190 Mitchell, ON NOK 1NO

Name of Company / Business

*

Contact Person

Telephone Number

*

Full Mailing Address:

*

Email Address:

*

Type of Product/Promotion:

*

Proof of Liability Insurance:

Insurance Company Name:

*

Policy Number:

CHOOSE ONE OF THE FOLLOWING OPTIONS

***OUTDOOR CONCESSION:** Number of Days Required: _____ Days x \$40 = _____

***INDOOR CONCESSION:** Number of Feet Required: _____ Feet x \$7 = _____

Hydro Required: _____

(limited availability)

Water Required: _____

(limited availability)

10% Discount if paid IN FULL by June 30, 2018 (no HST required)

Names for Passes: _____

Number of Saturday Dinner tickets required: **\$20.00 X** = _____

Office Use: Accepted: _____ Declined: _____ Payment Enclosed: _____

Date Processed: _____ Inv _____ BY: _____

For more information contact secretary@mitchellfair.com