

Mitchell Fair – FOOD Concession Sep 4 to Sep 6, 2026

E-transfer to secretary@mitchellfair.com or

Cheque payable to the Mitchell & District Agricultural Society, Box 190 Mitchell, ON NOK 1N0

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:** _____

Huron Perth District Health Form is required 30 days BEFORE event date.

<https://forms.hpph.ca/Partners-and-Professionals/Special-Event-Food-Vendor-Application>

Municipality of West Perth "Refreshment Vehicle License" is also required.

[Applications, Licences and Permits | Municipality of West Perth](#)

CHOOSE ONE OF THE FOLLOWING OPTIONS

***OUTDOOR FOOD CONCESSION:** Number of Days required: _____ Days x \$110= _____

Space requested/ Length of trailer: _____

***INDOOR FOOD CONCESSION:** Number of Feet Required: _____ (up to 16 feet)= _____ **\$200.00**

Hydro Required: _____

(limited availability)

Water Required: _____

(limited availability)

50% of the full payment is due by June 30 to guarantee your spot

10% discount if PAID IN FULL before June 30

Names of Staff: _____

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

Date Processed: _____ Invoice _____ BY: _____

For more information contact secretary@mitchellfair.com