

# 2010

*28<sup>th</sup> Annual Muscoda Morel Mushroom Festival*  
*Saturday, May 15<sup>th</sup> 10 am – 5 pm Sunday, May 16<sup>th</sup> 10 am – 4 pm*  
*www.muscoda.com*

Read the following information carefully before completing the application.

## **GENERAL INFORMATION**

There is **NO ELECTRICITY or WATER** available. The location for all art & craft vendors will be at the Railroad Park on Wisconsin Avenue and flea market vendors will be within walking distance. The Catholic Church lawn will be used for overflow only.

## **PARTICIPATION**

We reserve the right to accept or reject any application. Entries within a given category are limited to insure a balance of various media presented at the festival. A Sales Tax ID Number or Social Security Number is required. Vendors are responsible for their own insurance, sales tax, etc. Vendors may not sell projectiles.

## **FEES**

\$25 for a 15' x 15' site, no matter if you are here one day or both days.

**ENTRY FEES ARE NON-REFUNDABLE. ALL FEES MUST BE PAID IN ADVANCE.**

Checks returned for non-sufficient funds will incur an additional \$25 fee.

## **LOCATION & SITE NUMBER**

Sites are assigned on a "first come, first serve, basis".

## **DEADLINE**

Applications must be postmarked no later than May 1, 2010. A **\$20 late fee will be assessed** for any late applications.

## **CONFIRMATIONS**

Once we receive all the necessary paperwork:

1. ***Completed and signed application***
2. ***Payment***
3. ***Copy of sellers permit or a completed vendor tax form***

Confirmations will be mailed out between May 3 and May 10, 2010.

## **GUIDELINES**

Each exhibitor will be assigned an area 15' wide and 15' deep. Exhibitors must remain within the limits of the established spaces or purchase an additional site to accommodate your needs. Come prepared to load and unload your merchandise as vehicles are not allowed to drive onto the grass.

## **SET UP TIMES**

Set-up time is from 5 pm – 8 pm on Friday, May 14<sup>th</sup> or 6 am – 10 am on Saturday and Sunday. **NO EXCEPTIONS.** Give yourself enough time to arrive in Muscoda and to set up before the festival begins. The entire exhibition area is held outdoors, rain or shine, so plan for inclement weather.

**If you have any questions, call Cinda or Laura (608)739-3182(d)  
or e-mail: [cjohnson@wppienergy.org](mailto:cjohnson@wppienergy.org)**

Keep this sheet for future use!

*28<sup>th</sup> Muscoda Morel Mushroom Festival Application*  
*May 15<sup>th</sup> & 16<sup>th</sup>, 2010*

BUSINESS NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ E-MAIL: \_\_\_\_\_

DESCRIPTION OF ITEMS:  
\_\_\_\_\_  
\_\_\_\_\_

Please check the section that best describes your business:

- MERCHANDISE IS HAND CRAFTED BY YOU
- RESALE, IMPORTED, FLEA MARKET
- FOOD
- OTHER: consultant for: \_\_\_\_\_

Number of 15' x 15' **CRAFT** spaces @ \$25 per space:      How many sites \_\_\_\_\_ x \$25 = \_\_\_\_\_  
Number of 15' x 15' **FLEA MARKET** spaces @ \$25 per space      How many sites \_\_\_\_\_ x \$25 = \_\_\_\_\_  
Number of 15' x 15' **FOOD** spaces @ \$25 per space      How many sites \_\_\_\_\_ x \$25 = \_\_\_\_\_

**A LATE FEE OF \$20 IS ASSESSED FOR APPLICATIONS POSTMARKED AFTER  
5/1/10f**

**PLEASE MAKE CHECKS PAYABLE TO MUSCODA TOURISM COMMITTEE**

Po Box 206, Muscoda, WI 53573

web site: [www.muscoda.com](http://www.muscoda.com)      email: [cljohnson@wppienergy.org](mailto:cljohnson@wppienergy.org)

I agree to assume full responsibility for any loss or damage to exhibits. Furthermore, I do not hold Muscoda Tourism Committee or the Village of Muscoda liable in the event of loss, damage, accident or injury of any kind. I agree to be set up one hour before show time and will not dismantle until 5 pm on Saturday and 4 pm on Sunday. I understand that all fees are non-refundable. I have read in full and agree to the terms and conditions listed in the general information sheet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

**OFFICE USE ONLY:**

**Date Paid:** \_\_\_\_\_ **Amount Paid:** \_\_\_\_\_ **Ck No:** \_\_\_\_\_