

Sagadahoc Agricultural & Horticultural Society

Annual Topsham Fair

P. O. Box 236

Topsham, Maine 04086

Vendor Application

Name: _____

Address: _____

Town _____ **State** _____ **Zip** _____

Phone Number: _____

E-Mail: _____

Company Name: _____

State Tax Number: _____

Dept. Human Services Number: _____

******FOOD VENDORS, ARE YOU SERVE SAFE CERTIFIED? ******

Circle: YES OR NO

Vendor had read and agreed to the terms and conditions set forth. Circle: YES or NO

Applicant applies to Sagadahoc Agricultural Society for consideration of vending space for the purpose of selling and / or exhibiting and utilizing the rented space for the following purpose:

****Note: If food is to be sold please be specific and list all items. Only those items listed will be considered by Topsham Fair Officials. List does not guarantee approval.****