



Marshfield Agricultural & Horticultural Society

Incorporated 1867

## APPLICATION FOR DISPLAY OR SALES SPACE

*This application for space is hereby prepared and submitted to the Marshfield Fair for consideration in allocating space for the 2010 Fair to be held August 20th through August 29th, 2010.  
The undersigned certifies that all questions have been answered correctly.*

### PLEASE TYPE OR PRINT ALL INFORMATION

NAME OF COMPANY: \_\_\_\_\_

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ TAX ID NUMBER \_\_\_\_\_

NAME OF CONTACT PERSON OR APPLICANT: \_\_\_\_\_

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WHAT ARE YOUR SPACE REQUIREMENTS? (MINIMUM SPACE 10' X 10')

\_\_\_\_\_ FEET FRONTAGE \_\_\_\_\_ FEET DEPTH

**\*NOTE: ALL SPACE REQUESTED MUST INCLUDE TOTAL FOOTAGE NEEDED  
BY APPLICANT FOR AWNINGS, TANKS, TRAILER TONGUES, ETC.**

FOR WHAT PURPOSE WILL SPACE BE USED: \_\_\_\_\_

LIST ALL ITEMS FOR DISPLAY OR SALE: \_\_\_\_\_

UTILITIES REQUIRED:     110V (2 20amp outlets)     220V (1 30amp outlet)     WATER  
SEE RULES AND REGULATIONS SHEET SENT WITH CONTRACT FOR PRICING

OTHER SPECIAL NEEDS: \_\_\_\_\_

DO YOU HAVE THE FOLLOWING INSURANCE COVERAGE

COMBINED SINGLE LIMIT (\$1,000,000)     WORKMAN'S COMPENSATION

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**THIS APPLICATION IS SUBJECT TO SPACE AVAILABILITY &  
APPROVAL OF FAIR MANAGEMENT**

Post Office Box 5  
Marshfield, MA 02050  
Tel. 781 834-6629 Fax. 781 834-6750