



DELTA MAPLE SYRUP FESTIVAL | 2020



January 2020

Dear Friends of the Delta Maple Syrup Festival:

Plans for the 53rd Anniversary Edition of the Delta Maple Syrup Festival are well underway and at this time, the Board of Directors would like to extend a warm invitation to you to join us in Delta as a participant of our commercial concession program.

Established as the Village's Centennial Project in 1967, this year's Festival will be held during the weekend of April 18th and 19th.

For your reference and consideration, a Concession Application Form has been attached. Should you be interested in participating in our festival, I would ask that you please complete the attached form and return it with payment prior to March 31st, 2020.

There will once again be a raffle for a gift basket filled with items donated by our concessionaires. We are asking each vender to donate one small item for the basket; the item will be collected Saturday morning.

We look forward to renewing old acquaintances with our exhibitors from previous years as well as welcoming new participants to our festival.

Thank you for your patronage and we hope that you would enjoy your time in Delta this spring!

Respectfully,

Marlaine Hart

Chairperson
Concession Committee
Delta Agricultural Society

Home: 613-924-2407

Fair Office
Phone/Fax: 613-928-2800
Email: info@deltafair.com





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CONCESSION APPLICATION FORM



To reserve your space, contact Marlane @ 613-924-2407 on or before March 31st, 2020

Date: Saturday, April 18th and Sunday, April 19th, 2020
Location: Delta Fair Grounds, 110 Mill Creek Drive, Delta, Ontario K0E 1G0
Set Up Time: 7:00 a.m.
Closing Time: 3:00 p.m. on both days

Company Name (if applicable): _____

Contact Name: _____

Address: _____

Street Address Number

Postal Box Number

City / Town or Village

Postal Code

Contact Numbers: Phone / Cell: _____

Email: _____

There will once again be a raffle for a gift basket filled with items donated by our concessionaires. We are asking each vender to donate one small item for the basket; the item will be collected Saturday morning.
◇ Yes, I am will to donate an item for the gift basket.

Location of Space Required: Indoor _____ Outdoor _____

Space is allocated on a first come with payment, first served basis.

Merchandise to be sold: _____

Main Exhibit Hall-Second Floor

Note: Tables / chairs are provided: Prices now include mandatory HST

- One 6' Table Space \$25
- Two 6' Table Spaces \$35
- Corner space with Two 6' Table Spaces and Corner Area \$50
- Cage \$70



Main Exhibit Hall-Outside Space: Prices now include mandatory HST

Note: Vendors supply their own tables, chairs and canopies.

- 10' x 12' space \$25

All prices are based upon two-day occupancy and must be paid in full prior to set up.

COMPLETE REVERSE SIDE

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Concession Space Requested: _____

Rate: \$ _____

HST #: 12345 2492 RT0001

HST Included

Total: \$ _____

Please make all cheques/money orders payable to the Delta Agricultural Society and Return with the application to 110 Mill Creek Drive, Box 220, Delta, Ontario K0E 1G0.

HOLD HARMLESS AGREEMENT

I, The Concessionaire, shall indemnify and hold harmless the Delta Agricultural Society, their members, agents and employees from and against all claims, demands, losses, costs, damages, actions, suits or proceedings by any third parties that may arise out of, or may attribute to all operations performed by or carried out by The Concessionaire, his/her agents, employees or servants, or for whose acts may be held liable, however caused.

The undersigned hereby agrees to accept and abide by the Hold Harmless Agreement, all terms and conditions and the decisions of the Delta Agricultural Society.

Date: _____

Name: _____
(Please Print)

Address: _____
(Civic Address / Postal Box Number)

Address: _____
(Town / City with Postal Code)

Contact Number: _____
(Home Telephone / Cell Phone)

Signature: _____

FOR OFFICE USE ONLY

Date Application Received: _____

Payment Enclosed: () Yes / () No

Payment Method: () Cash () Cheque () Money Order

E-Transfer to the following email address: info@deltafair.com / password is deltaxfair1830

**Application must still be sent to the Office in advance if paying by e-transfer.