



**NEW PARIS APPLEFEST
NEW PARIS, OHIO
SEPTEMBER 22 & 23, 2007**

REQUEST FOR EXHIBIT SPACE

www.newparisoh.com/applefest

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Person Responsible: _____

Description of Exhibit: _____

Special Request: _____

Please Check Items that Fulfill Your Exhibit Needs:

Type of Space	Cost	Total
12 X 12	\$40	_____
12 X 24	\$55	_____
Each Add'l 5 Foot	\$10	_____
Electrical Hookup		
120 Electric 500 Watts	\$15	_____
120 Electric 1000 Watts	\$20	_____
220 Electric (50 Amps)	\$40	_____
220 Electric (60 Amps)	\$40	_____
Total		\$_____

Tents available upon request. Call for size/price. Tables available for \$6.00 each (prepaid). Food license may be required. Contact Preble County Health Department at (937) 456-8187 Monday – Friday 8 – 4. Must be inspected prior to serving food.

Make Checks Payable to: New Paris Area Chamber of Commerce

Mail Check and Application to: Attention: Dale Hall
 Countryside Inn
 417 N. Spring St
 New Paris, Ohio 45347

Information Contact: Dale Hall
 (937) 437-5475