

12th Annual Michigan Honey Festival

Shiawassee County Fairgrounds 2900 Hibbard Rd. Corunna, Michigan

> July 20 & 21, 2024 10am-5pm

VENDOR INFORMATION – Please PRINT clearly

Date			Ck#:		
Name					
Address					
City/State/Zip					
Business Name					
Email					
Mobile:	Text: Y	N	Landline:		
Website:					
Products to show/sell:					
NOTE: Tables and chairs are NOT included. No refunds given after May 25, 2024 All vendors must register and sign in prior to set up. We ask for a donation to the raffle valued at a min. of \$15. Don't forget to include your business card! Set up times are: (please keep an eye out for email updates) Friday: 5pm-8pm I will be setting up on Friday					
Saturday: 8am-9:30am – ALL VENDORS I will be setting up Saturday	S MUST BE S morning	SET UP B	3Y 9:30am		

Indoor Booth Request* (must attend both days)

10X10	\$100.00	\$
10X20	\$125.00	\$
10X30	\$155.00	\$
10X40	\$195.00	\$
Electricity	\$10	\$

Outdoor Booth Request (We are not responsible for weather) $10X10 - 2 Day^*$ \$70.00 \$

Vendor Weekend Parking Passes (Two are included)

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Number of addit'l passes:	at \$5.00 ea.	\$
	TOTAL	•

MAKE CHECKS PAYABLE TO:

MICHIGAN HONEY FESTIVAL 10326 Nichols Rd. Montrose, MI 48457 989-295-0379 michhoneyfestival@gmail.com Contact: Cheri Persall

^{*}Those who do not stay for the full 2 days will not be asked back

WAIVER OF LIABILITY

This agreement releases and forever discharges Michigan Honey Festival 501(c)(3) nonprofit and their board members, volunteers, and any and all persons who might claim to be liable, whether or not herein named from all liability, claims, lawsuits and demands relating to injuries or property damage that may occur during or anyway related to the Michigan Honey Festival events held at the Shiawassee County Fairgrounds on July 20-21, 2024. By signing this agreement, I agree to hold Michigan Honey Festival 501(c)(3) nonprofit entirely free from any liability, including financial responsibility for injuries or property damage incurred, regardless of whether injuries are caused by negligence in the State of Michigan.

I also acknowledge the risks involved in **beekeeping activities**. These include, but are not limited to **stings**, **falls**, **shock**, **allergic reactions and personal injuries**. I swear that I am participating voluntarily, and that all the risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below, I forfeit all rights to bring a suit against Michigan Honey Festival 501(c)(3) nonprofit for any reason. In return, I will receive services rendered by the Michigan Honey Festival 501(c)(3) nonprofit. I will also make every effort to obey safety precautions listed in writing or explained to me verbally. I will ask for clarification when needed.

I,	_, fully understand and agree to the above terms.
Date:	
Printed Name:	
Signature:	
If under 18 years old, signature of legal guardian is requi	red: