

# 2024 Morrow County Fair August 26 - September 2, 2024

SPACE APPLICATION FOR MORROW COUNTY FAIR  
Application Does Not Guarantee Space at The Morrow County Fair

Date: \_\_\_\_\_  
Business or Concession Name: \_\_\_\_\_  
Owner/Operator (Contact Name): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Name of Person(s) managing your location if different from above:  
\_\_\_\_\_

Describe your products (each item must be listed for consideration) including brand names, your service, what your display consists of (color photograph required of food applicants booth or trailer). If you need additional space, please use an additional sheet: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you applying for?  
Inside exhibit space: \_\_\_\_\_ Outdoor exhibit space: \_\_\_\_\_ Concession location: \_\_\_\_\_  
Please give dimensions of space desired: H \_\_\_\_\_ W \_\_\_\_\_ L \_\_\_\_\_ D \_\_\_\_\_  
Will you need electrical service? \_\_\_\_\_ Amperage: \_\_\_\_\_ Voltage: \_\_\_\_\_  
Please indicate your choice of building or outdoor location preference:  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Please give at least one reference (name, address, phone number) of any Fair, Festival or event where you have participated:  
\_\_\_\_\_  
\_\_\_\_\_

Signature of person making application: \_\_\_\_\_

**Please complete this form and email to [morrowcountyfairohio@gmail.com](mailto:morrowcountyfairohio@gmail.com)**

Morrow County Fair  
Concession/Vendor Committee  
P.O. Box 168  
Mt. Gilead, OH 43338

Phone: 419-947-1611 Fax: 419-947-1612