

Manistee County Fair

- Since 1871 -

NEW***MIDWAY MARKETPLACE***

MIDWAY MARKET Booth Contract - 2026

Marketer/Business Name: _____

Phone Number: _____

Email Address: _____

Address _____

City: _____ State: _____ Zip: _____

Products: _____

Booth Requirements (Check all that Apply)

Type of Booth # of Booths	Cost Per Booth Space	Total Cost
1 day Booth, might be outside DAY CHOICE:	\$ 40.00	
2 day Booth, might be outside DAY CHOICES:	\$ 40.00	
Saturday Farmer's Market	\$ 40.00	

Total \$ Amount Paid: _____

• You will need to provide all items needed for display in booth(s), including table(s) and chair(s) •
• Move-out day is Sunday, August 2nd, 8 AM-Noon
• Merchant building hours are 3 PM - 10 PM (Tu - Fr) Noon - 10 PM Saturday • If you have any questions, please call the Fair Office (231) 655-1116 or send an email to: manisteecountyfair@yahoo.com OR call Mindy Sedelmaier 231-233-0963 or email mindysedelmaier@gmail.com

• Please mail your completed form, Payment, and proof of liability coverage to:
Manistee County Agricultural Society
P.O. Box 398
Onkama, MI 49675

* Please make your check payable to "Manistee County Agricultural Society"
• If you prefer, you may fill this contract out online and process your payment with your contract on our website: www.manisteecountyfair.org.

- To ensure your spot in our Merchant Building or among our outside vendors, please have your contract and payment postmarked no later than July 12, 2026

Waiver

To replace insurance coverage, for loss or damage to product or materials, including theft. I and my business will hold the County of Manistee and Manistee County Agricultural Society and its Directors blameless for any loss I or my business may suffer due to loss and/or damage of any products or materials I have for sale or display. I understand the County of Manistee and Manistee County Agricultural Society assume no liability for any loss I may incur.

Marijuana, vulgar, or profane materials are not to be displayed in booths. MCAS reserves the right to close, for cause, any stand or booth or terminate any privilege held or used in violation of these rules.

Business Name: _____

Authorized Signature: _____ Date: _____

MCAS Representative: _____ Date: _____

P. O. Box 398 • Onkama, MI 49675 • 231.655.1116 • manisteecountyfair@yahoo.com

Leave a message and contact information

www.manisteecountyfair.org