

2022 WANNIGAN DAYS COMMERCIAL VENDOR REGISTRATION FORM

Friday July 15 and Saturday July 16 • 10 am to 10 pm

Set up begins at 8 am - free overnight security - no load out until after Friday or Saturday evening

Downtown on our Mainstreet SCF at Beautiful Overlook Memorial Park

Address: GPS to 200 North Washington Street, St Croix Falls, WI 54024

Registration Deadline July 10 (Yes - exceptions can be made but please RSVP and contact us)

Please share www.wannigandays.com

Commercial Vendors: \$400 per space

Booth spaces: 10x10 (you will need to supply your own tent, tables, etc) One vendor per direct sales company – first come first serve. Please inquire for availability! 12 x 12 max size please

COVID19 Policy - Attendees are encouraged to social distance. There is not a mask law in Wisconsin at the this time. Generally people have been well behaved at Summer events in the area.

Confirmation: Space is NOT confirmed/guaranteed until both your form & payment have been received. You will receive a confirmation email. A map of vendor spaces will be emailed two days prior to event and spots will be posted online scfaf.com and Facebook two days prior to event.

- Fees payable by check or cash to: Wannigan Days PO Box 337 St Croix Falls, WI 54024 or PayPal to mcbriewoody@aol.com or Venmo to @Woody-McBride-1 • No Refunds

- Vendors are not guaranteed exclusive rights to a product - however we try to do that.

- Vendors supply their own power (whisper/quiet generators only). No power is available onsite.

Waiver: Vendors agree to hold their own insurance, (food vendors only) a polk county food service permit and assume all responsibility for their person, property, vehicles, goods, services - and will not hold (the City of St Croix Falls, The Falls Chamber of Commerce, Music On The Overlook, Woody McBride, Amanda McBride, or anyone associated with the coordination of the event) responsible for any injury, theft, mishaps, incidents or claims on or off the event grounds related or unrelated to the SCF Wannigan Days event.

Please detach at the line & return bottom portion with your payment to the address above!

Your Email:

Vendor Type or Business Name:

Your Name:

Address:

City:

State:

Zip Code:

Contact Number:

Brief Description of Items You Are Wanting to Show:

Number of Spaces Requested:Special needs or vehicles:

Vendor Signature:

Date: