

Hartford Fall Festival Sept. 26 & 27, 2026 Vendor Application



- Space: 12' x 12' - at the Hartford Public Library 12 Church St. Hartford, MI—Vendor's booth spaces will be assigned Friday night or Saturday morning at the Greater Hartford Area Chamber of Commerce booth in front of the library.

Non-refundable fee: \$40.00 per space

Setup Time: Friday Sept. 25th from 5pm-7:30pm

Setup Time: Saturday Sept. 26th from 7:30am— 10am

Setup Time: Sunday September 27th from 8am—10am

**Early payment—registration deadline-September 1, 2026
(After September 1st, registration is \$50.00)
Registration deadline is Sept 19, 2026**

Festival Times: Sat. Sept. 27th 10am—5pm; Sun. Sept. 28th 10am-4pm—**Vendors are required to attend both days.** For set up instructions and to receive your spot, check in with festival staff at the Chamber booth in front of the Hartford Public Library.

The festival closes at 5pm on Saturday and 4pm on Sunday. Please do not take your booth down before closing times on festival days or you will not be asked to return (unless you have made prior arrangements with Festival Personnel).

All home made food items sold must follow Michigan's Cottage Food Laws. Go to: Michigan.gov for current information.

After unloading all vendors must park their vehicles in the city parking lot North of Main Street, behind City Hall or the city owned parking lot South of Main St. Vendors are prohibited from parking on Hartford Public Library property without prior permission from the festival chairman. All vendors must leave the park on the last day of the festival. You will not be permitted to stay overnight.

Vendors are responsible for bringing their own canopy, tables & chairs. **All canopies are required to be anchored or weighted.**

Vendors are not permitted to stay overnight on the Library premises.

Vendor Cancellation Policy: *Less than 15 days before event: No refund will be issued.*

No-Show Policy: *Vendors who do not attend and have not given prior written notice will forfeit all fees and may be excluded from future events.*

Event Cancellation or Postponement

If the festival is cancelled or postponed due to weather, public health concerns, or other unforeseen circumstances, vendors will be notified promptly.

Rescheduled event: *Vendor space will be transferred to the new date.*

If you wish to have your booth highlighted on the Hartford Fall Festival Facebook page please send us some photos of your booth or products and description to hartfordmichamber@gmail.com

If you would like to receive confirmation of your booth space please provide an email address and mark the appropriate box.

Proper etiquette: This event is a family oriented event. Please be friendly to the customers and vendors around you. Swearing, yelling or aggression will not be tolerated.

Questions or additional information please contact: Kaitlan Trine (269)986-4113
email: kkeeder13@gmail.com

See Page 2 for application



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Mail this form with your check, money order or credit card information to:

The Greater Hartford Area Chamber of Commerce
P.O. Box 283
Hartford, MI 49057

☐ Crafter Vendor ☐ Commercial Vendor ☐ Non-Profit Vendor ☐ Other Vendor

Date: _____ Phone # (_____) _____ - _____ ext. _____

Your Name: _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ @ _____

☐ I would like a confirmation email about my booth space.

My website: _____

Explain in detail what you will be selling or displaying:

Amount enclosed: _____ Spaces: _____

To pay by credit card: Credit Card #: _____

Name on Card: _____

Exp. Date: _____ Total: _____ CVV: _____ Zip Code: _____

Signature: _____

I understand that by participating in the festival, I take full responsibility for anything that happens to myself or property. I agree NOT to hold the Greater Hartford Area Chamber of Commerce, its members, the Hartford Public Library, and/or Library employees responsible for accidents, loss or damage to myself or property.

X _____

Signature of applicant

Date

See page 1 vendor information

Staff Only

Date: _____

Amount: _____

Number: _____

Scanned: _____