

Hartford Strawberry Festival

Food Vendor Application

June 12 & 13, 2026

📍 **NEW LOCATION:**

Hartford Public Library 12 Church St. Hartford, MI 49057



IMPORTANT NOTICE

- There are **NO electric spots** at this location. All vendors must run on generators.
- **Limited water hookups** are available on a **first-come, first-served basis**.

Vendor Information

Business Name _____

Contact Name: _____

Phone: _____ - _____ - _____

Street Address or P.O. Box: _____

City: _____

State: _____

Zip Code: _____

E-mail Address (Required): _____

Space & Fees

Name of Company	# of Spaces	Cost per Space	Total Enclosed

Menu Information

Top Three Items on Your Menu:

1. _____
2. _____
3. _____

Social Media

Do you have Facebook you would like us to follow?

☐ Yes ☐ No If yes, please provide Facebook name: _____

Agreement & Liability Waiver

I have read, understand, and agree to abide by all **Strawberry Festival general information, rules, procedures, rates, and conditions**.

By signing this application, I acknowledge that the festival is subject to various weather conditions and state and federal safety and health regulations. **No refund of application fees.**

Exhibits must remain open until festival closing.

I understand that by participating in the festival, I take full responsibility for anything that happens to myself or my property. I agree **NOT** to hold the Greater Hartford Area Chamber of

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Commerce, its members, the City of Hartford, city employees, or the Hartford Public Library liable for accidents, loss, or damage to myself or my property.

Applicant Signature: _____

Date: _____

Please Print Name: _____

The above-named has read and understands the general information, procedures, and conditions and seeks admission as a concessionaire.

Payment Information

- ☐ **Check enclosed** (Payable to *Greater Hartford Area Chamber of Commerce*)
- ☐ **Credit Card**
- ☐ **Online Payment**

Mail Application & Check To:

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

Staff Only

Date: _____

Amount: _____

Number: _____

Scanned: _____

Online Payment Option:

www.hartfordmichamber.org

(Click on the Events Page tab & then click on **buy ticket** on the Strawberry Festival Food Vendor box.)

Vendor application must still be emailed to: **hartfordmichamber@gmail.com**

Please review Food Vendors Rules document for more information.

Credit Card Information (if applicable)

Credit Card Number: _____

Name on Card: _____

Expiration Date: _____

CVV: _____

Zip Code: _____

Total Amount: _____

Cardholder Signature: _____

Questions or Additional Information

Contact: Patty Schroeder

☎ (269) 621-5303

✉ hartfordmichamber@gmail.com

🌐 www.hartfordmichamber.org

The Greater
HARTFORD AREA
Chamber of Commerce 