STRATE FAR	ILLINOIS STATE FAIR STEAM EXPO Located at the Orr Building			
Illinois Department of Innovation & Technology	2022 DRAFT Application for Vendors / Exhibitors (Indoor)			
Business Information				
Business Name:	Application Date:			
Contact Person (Mr. / Ms.)				
Mailing Address:				
City:	State: Zip Code:			
Work/Office Phone ()	Home Phone ()			
Cellular Phone (*required) ()	Fax ()			
Email Address (*required)				
Participation Information				
Anticipated Participation Dates:				
Wednesday, Aug. 18				
Thursday, Aug. 19				
Friday, Aug. 20				
Saturday, Aug. 21				
Sunday, Aug. 22				
Product Information				

Please provide description of what will be highlight or showcased in area:

ALL PRODUCTS MUST BE APPROVED AND ONLY ITEMS LISTED ABOVE WILL BE CONSIDERED. PLEASE BE THOROUGH-ONLY ITEMS LISTED ABOVE WILL BE ALLOWED TO BE EXHIBITED PERSUANT TO STATE AUDITOR RULES.

NEW APPLICANT: If possible, please submit a color photo or detailed drawing of vendor / exhibit/ display with application.

-	ences of shows a		•			• •	
Event:	Contac	tact Name:		_ Telephone:			
Event:	Contact Name:			Telephone:			
Event:	Contac	t Name:		Telephone:			
Insurance							
General liability insurar	nce is required.						
Agency:		Agent:			Telephone #:		
Space Requirements							
/inimum Request: /aximum Request:	Frontage: Frontage:						
Number of tables (6 x	2.5 ft):						
Internet & Electricity F	equirements						
nternet required:	□ Yes	□ No					
f yes, please estimate					reless 🛛	Hard Wired	
	ne building will b	•	•	•			
Internet services in t Please reference this	Broadband Speed						
Please reference this <u>E</u>	Broadband Speed	□ No					
		□ No	_				
Please reference this <u>E</u>	☐ Yes If yes, please ir	□ No	_				
Please reference this <u>E</u> Electricity required:	☐ Yes If yes, please ir	□ No ndicate appropr	_	/olt:			
Please reference this <u>E</u> Electricity required:	☐ Yes If yes, please in ☐ 110 Volt ☐ 30 Amp ndors/exhibitors an	□ No ndicate appropri □ 220 Volt □ 50 Amp re required to s	riate Amp & V □ 100 Am supply all of th	/olt: p eir own elec		(power cords, power s	

If Yes, explain:

Do you plan to present a demonstration?	□ Yes	□ No						
Do you plan to use a microphone / pitch?	□ Yes	□ No						
If Yes, the sound must be kept low enough so it does not interfere with surrounding booths.								

NOTE: IL State Fair reserves the right to accept or reject any applicant based on the uniqueness and / or quality of product or services. Space availability, attractiveness of space / booth and references from other fairs / shows are also factors that are taken into consideration.

DO NOT send a deposit with your application or obtain the required insurance prior to obtaining a space. This is only an application; it does not guarantee a space will be offered. You will be contacted once the decision is made to offer space.

Signature of Applicant:

IL406-0419(8-85) IMPORTANT NOTICE: This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Illinois Revised Statutes., Chapter 127, Paragraph 1701 through 1713 and Chapter 8, 31T1 through 37T4. Failure to provide this information shall prevent this form from being processed. The form has been approved by the State Forms Management Center.

For Office Use Only:

Date Received: Exhibitor:

Vendor: _____