

**33<sup>rd</sup> ANNUAL DICKENS OF A CHRISTMAS**  
**WELLSBORO, PA**  
**MAJOR FOOD VENDOR APPLICATION**

The search is on for creative Dickens vendors to populate the streets of Wellsboro during the 33rd Annual Dickens of a Christmas celebration, Saturday, December 3<sup>th</sup>, 9:00 a.m. to 4:00 p.m.

**Victorian garb and seasonal decorations are a requirement for all booths.** There will be a costume workshop for interested “Dickens of a Christmas” vendors/participants on Wednesday, November 2<sup>nd</sup> in the lobby of the Penn Wells Hotel at 7:00 p.m.

Participants are responsible for their own display equipment, tables, etc. **Electricity is not available; please DO NOT request electric from business owners.**

**\*\*\*PREPAID booth rental fee for major food vendors: \$300.00\*\*\***

**(Non-refundable)** (Please make checks payable to the Wellsboro Chamber of Commerce)

Get your application in early – **deadline is June 27<sup>th</sup>, 2016.** Vendors accepted will receive a map showing their reserved space and further information. We will mail out acceptance near August 30<sup>th</sup>, but please allow time for mail to be delivered.

*NOTE: Do not assume admission: We reserve the right to reject items that are not appropriate.*

WELLSBORO CHAMBER OF COMMERCE  
33<sup>rd</sup> ANNUAL DICKENS OF A CHRISTMAS  
December 3<sup>rd</sup>, 2016  
**MAJOR FOOD VENDOR APPLICATION**

For Office Use Only

Space # \_\_\_\_\_

Paid \_\_\_\_\_

Pmt. Method \_\_\_\_\_

Date Rec'd \_\_\_\_\_

Category \_\_\_\_\_

Name: \_\_\_\_\_

Organization/Business: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

PA SALES TAX NUMBER: \_\_\_\_\_

(Required-phone PA Dept. of Revenue for application 717-787-1064)

VEHICLE LICENSE # \_\_\_\_\_

**FEE: \$300.00**

Description of Products to be sold: **(PLEASE LIST)**

\_\_\_\_\_  
\_\_\_\_\_

Items offered for sale at your booth **MUST** be limited to those items listed above. Multi-vendors in a booth must be registered as such. Vendors not registered will be asked to leave.

**Do not request electric. Please DO NOT contact business owners for use of their electric.**

Complete and return with registration fee and a self-addressed stamped envelope to:

Wellsboro Area Chamber of Commerce

P.O. Box 733

Wellsboro, PA 16901

For questions please call 570-724-1926 or email [info@wellsboropa.com](mailto:info@wellsboropa.com)

**DEADLINE IS JUNE 27<sup>th</sup>, 2016.**

We accept Visa and MasterCard for payment

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address (if different than above): \_\_\_\_\_

Signature \_\_\_\_\_