



Vendor Rules & Regulations

- 1.) Compass Health Network suggests all vendors wear a mask and social distance while inside the venue.
- 2.) **All furniture (canopies, chairs, tables etc.) must have a protective covering on the bottom to prevent ripping the venue flooring. Vendors must provide their own chairs and tables.**
- 3.) In an effort to ensure the fair aligns with company goals and mission, Compass Health Network reserves the right to deny any booth applications.
- 4.) Vendors are responsible for their own clean up and trash disposal.
- 5.) Doors will open at 9 AM for setup the day of the craft fair only. No early setup. The event opens to the public at 10 AM.
- 6.) Check-in prior to unloading and locating your booth.
- 7.) All vendors are responsible for setting up and dismantling their booth.
- 8.) Vendors are to keep their booth clean during the market and when departing.
- 9.) There will be only one direct sales vendor per company. This will be on a first come, first served basis.
- 10.) Vendors are urged to completely cover their table to obscure packages, personal items etc.
- 11.) Vendors are responsible for collecting and reporting appropriate sales tax on their merchandise.
- 12.) Vendors should stay until the end of the event (3 PM).
- 13.) All credit card processing must go through your own data provider.
- 14.) Items prohibited for sale or display include (but are not limited to): alcohol, firearms, tobacco products, knives, firecrackers, items promoting drugs, drug paraphernalia or offensive language. Compass Health Network reserves the right to remove items they deem to be inappropriate. Failure to abide by these rules could result in the exhibit being removed from the event.
- 15.) In the event of a vendor cancellation, Compass Health Network must receive written notice more than 14 days before the event. A \$15.00 service charge will be deducted from any refund. In the event of the county or city shutting down due to COVID, a full refund will be issued.

Vendor Name: _____

Vendor Signature: _____

Date: _____

To be filled out by Compass – Booth #: _____