



VENDOR CONTRACT – October 10-11, 2025
Prescott Rodeo Grounds
840 Rodeo Dr. Prescott, Arizona 86305

Exhibitor/Vendor Name: _____

Business Name: _____

Address: _____

City _____ State _____ Zip _____

Cellphone: (____) _____ - _____ Home/Business Phone: (____) _____ - _____

E-Mail address (print): _____

An Arizona State Transaction Privilege Tax number (TPT) is required - verifiable prior to the event.
AZ TPT # _____ ISSUED TO: _____
Write "applied for" if applicable. Important: Include the name under which the license is/will be issued.

- Will you need overnight parking for an RV or trailer (no hookups available), trailer? A permit may be provided to you.
RV/Vehicle Make _____ Model _____ License # _____
Will you need a power outlet for your booth space? [] (check if yes – Grandstands and deck only)
Other requests: [] Motorized utility cart service (free) What is preferred arrival time on Friday ? _____
Vendor helper [] Helpers are \$20 p/h payable at the time your application and payment are submitted
2 badges per each paid space – additional badge requests subject to approval. Please print badge names below:
(Badge 1) _____ (Badge 2) _____
Additional badges: _____

SPACE & TABLE # PREFERENCE (Space/Table numbers and fees are shown on Space Layout Maps.)

1st choice _____ 2nd choice _____ 3rd choice _____

*Placement of spaces as shown on Space Layout Maps could change depending on changes to venue requirements or other unforeseen circumstances.

[] ← Must be initialed

VENDOR AGREEMENT

I HEREBY RELEASE the Thumb Butte & Yavapai Questers, Prescott Frontier Days and the Town of Prescott from any and all liability on account of personal injury or property loss or damage caused by theft, fire, public catastrophe, act of God, or any other cause. I agree to indemnify the Thumb Butte & Yavapai Questers, Prescott Frontier Days and the Town of Prescott for any loss or damage suffered on account of any action or negligence on my part. I have read and clearly understand my responsibilities to abide by the rules presented to me with this application and that failure to do so may result in my disqualification for future shows. I understand no refund requests will be granted. I further understand a TPT # is required prior to the event and failure to provide a valid TPT # will result in forfeiture of space and payment.

Signature _____ Date _____

Mail contract and check (payable "Thumb Butte Questers" to Kathryn Konkel, 8083 N. Turning Leaf Dr. Prescott Valley, AZ. 86314. We offer free electronic payments via Zelle or Venmo. Contact Kathryn 818-679-0723 or email prescottantqueshowytb@gmail.com for specific payment instructions. Any fees that may be incurred are responsibility of vendor.

ACCEPTED BY: _____ SPACE # _____ SPACE FEE \$ _____ TABLES \$ _____ TOTAL \$ _____

PAYMENT TYPE: CK # _____ CASH _____ ELECTRONIC _____ DATE RECEIVED _____