

VENDOR APPLICATION

Halloween Spooktacular:
2025: 3,000+ guests

Required Documentation:
A recent photo of your booth and the products that you offer
Current Florida Tax Certificate/Resale Certificate
Applicable Business License

Vendor Booth Requirements:
All booths, tents, trailers, tables, signage, and displays must be clean, professional, and well-maintained.
Vendors are responsible for providing their own tent, tables, chairs, extension cords, lighting, and setup materials.
Tents must be properly weighted; no stakes unless in a dirt area.
All generators must be "whisper-quiet" inverter-style generators to minimize noise.
Excessively loud generators will not be allowed.
Booth space may not be subleased, shared, or transferred.
Vendors are responsible for collecting and reporting their own sales tax.
Vendors must be set up and in place by 4:00 PM. Latecomers will not be allowed to set up past this time.
Submission of an application does not guarantee acceptance into the event. Vendor spaces are limited and may be selected based on product type, uniqueness, quality, and event needs. No refunds will be issued due to circumstances on the vendor's part or acts of God. You will be notified of your acceptance into The Halloween Spooktacular by September 1, 2026.
By submitting this application, the vendor acknowledges they have read and agreed to all event rules, regulations, and requirements established by Lake Wales Main Street.

RETURN TO: Lake Wales Main Street, PO Box 4125, Lake Wales, Fl 33859
mainstreetlakewales@outlook.com (if emailing, a credit card number must accompany the application. Please call 863-249-7936 to let staff know that you have emailed your application, as it will go into a spam folder.

VENDOR APPLICATION

HALLOWEEN SPOOKTACULAR– OCTOBER 30, 2026 – 5:00 PM – 9:00 PM

APPLICATION MUST BE COMPLETE – DO NOT LEAVE ANY BLANKS

Vendor Fees:

Craft Space	10x10	$50.00 per event
Standard Food Space	10x20	$100.00 per event

Please check the dates that you would like to participate:

[ ] Craft Booth [ ] Food

PLEASE PRINT OR TYPE

BUSINESS NAME:_____

CONTACT PERSON OR OWNER:_____

CELL PHONE:_____**EMAIL:**_____

Booth Set-Up:

[} Tent {] Trailer [ ] OTHER:_____

Generator? Please list type of generator used_____

Booth /Trailer Measurements front bumper to end:_____

Describe your booth, product, and price. Please note that ONLY the items listed on this application are allowed to be sold at the event:

_____

_____

{] Check or Cashiers Check Enclosed [ ] Credit Card

Name on Card:_____

Card Number:_____

Exp Date:_____Security Code:_____

Billing Zip Code:_____