



56th Annual Topsfield Strawberry Festival

Saturday, June 14, 2025 10:00 a.m. to 4:00 p.m. (Rain or Shine)

Please use **"1 Howlett St. Topsfield"** for GPS directions

Sponsored by the Topsfield Historical Society

~VENDOR APPLICATION AND INFORMATION ~

Location: On the picturesque Topsfield Town Common, Topsfield, Massachusetts

Entry Fee: \$115.00 per space. Please note, once vendor is accepted, all entry fees are non-refundable.

For ease of new volunteers, payments this year will be by *personal or bank check only*, and included with application.

Checks will not be cashed until your acceptance into the festival is confirmed.

Application Deadline: March 31, 2025. There will be a \$50.00 late fee for any application received after the deadline.

(\$30.00 fee will apply to any check returned due to insufficient funds.)

Please allow 14 days after deadline for response on acceptance.

Please apply early, as categories fill up quickly and previous participations will not guarantee acceptance.

Craft Exhibitor Information

Exhibitor space is approximately 12' wide x 12' deep.

All Crafts must be handcrafted by you, there are no exceptions to this.

In order to maintain a high quality, well-balanced show, the jury reserves the right to limit vendors in craft categories.

The Topsfield Historical Society has the right to remove any offensive products that do not comply with regulations.

Tents must be secured by weights or other option for safety in the event of windy weather.

All vendors are required to have a MA Tax ID number or SS# submitted with application for permitting process.

We DO NOT supply vendor tables, chairs or any electricity options.

Set-Up/Day Of: Tents and tables may be set up Friday after 5:00 PM.

Photographs

Judging and acceptance of exhibitor's applications will be based on high-quality images of your product.

We prefer that high resolution photo copies should be printed and included with your application.

However, if this is an issue, pictures may also be emailed to chairman.strawberryfest@gmail.com

If emailed, please make sure that you clearly state who/business name that the photos are coming from.

Photos should include: A photo of your booth display, at least 2 close ups of crafts, and item price range.

Food Exhibitors

All food items must be handcrafted by you, no exceptions allowed.

Exhibitors selling specialty foods (candy, dip mixes, salsa, etc.) must obtain a Food Service Permit from the Topsfield Board of Health 978-887-1520. Permit must be with you on Festival day.

Miscellaneous

Registration Table will be available for questions at 7:00 AM Saturday.

Any exhibitor not registered by 9:00 a.m. may forfeit their space without a refund to an exhibitor on our waiting list.

There is no smoking or alcohol consumption on the Common during the Festival.

We want to emphasize the importance of maintaining a positive and respectful environment for all involved.

Annual Topsfield Strawberry Festival Vendor Application

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Festival Fee: \$115.00

Check payable to: **TOPSFIELD HISTORICAL SOCIETY**

Be sure to enclose: completed application, application payment, and high quality printed photo images to:

**JAN SMALLMAN
STRAWBERRY FESTIVAL
20 HIGHLAND AVE.
NEWBURYPORT, MA 01950**
email: chairman.strawberryfest@gmail.com

(Please print legibly)

Vendor Name : _____

Business Name: (include website if available) _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Email Address: (*mandatory for notice of application status*) _____

Type of Craft: _____

Previous Years Attended: (?) _____

Massachusetts Tax I.D. Number OR SSN: _____

I have read and agree to the above Topsfield Historical Society's rules and regulations.

I will assume full responsibility for my belongings and will not hold the
Topsfield Historical Society or its volunteers responsible for any loss or damage to my wares.

Once accepted, I understand that my entry fee is non-refundable.

I understand that there is a \$50.00 late application fee and a \$30.00 fee for insufficient funds on checks.

Applicant Signature: _____

Date: _____