



Bethalto Homecoming 2026  
September 4th – September 7th  
Vendor and Booth Application

<b><u>Vendor Information:</u></b>	
Business or Organization:	
Contact Person:	
Phone Number:	
Address:	
Email:	

**Booth Information**

Selling a Good or Product	\$200 per 15' by 15' spot	
Informational	\$100 per 15' by 15' spot	
Booth spaces are 15'x15' Maximum of 3 Spaces Allowed		
Number of Spaces Requested:		
Food or Refreshments: Please List the top items that you will be selling at the event:		
Electrical Service:		
110 Electrical Service	Yes	No
220 Electrical Service (Additional \$25)	Yes	No
Description of Booth and Equipment Being Used:		

Booths are first come first serve. We try not to duplicate vendors however; exceptions can be made by the Homecoming Committee. The Bethalto Homecoming Committee has the right to refuse any vendor application.

Vendor trailers/stands must be compatible with a GFI electrical system.

If you are preparing food, you must comply with the Health Department Regulations.

Vendors must provide a copy of insurance and any business license with this application.

Make checks payable to:        Bethalto Fire Department Association  
213 N Prairie St. Bethalto IL 62010

PAYMENT MUST BE RECEIVED PRIOR TO VENDOR SETTING UP BOOTH. NO EXCEPTIONS!!!  
Applications due by August 10th 2026! Any applications returned after this date will be charged a \$25 late fee.

<b>Food Truck Information</b>	
If you are serving any food or drinks you will need to fill out below.	
Name of Food Truck:	
Owner Name:	
Phone Number:	
Address:	
Email:	
Alternative Contact Name:	
Phone Number:	
Vehicle Make/Model:	
Vehicle Licenses:	
Bethalto Business Licensee	
Madison County Health Department Licenses:	

I Hereby waive, release, and discharge any and all claim for personal injury, death or property damage which may hereafter as a result of my actions under this permit. I agree to indemnify and hold harmless Village of Bethalto, and its officers, employees, attorneys and agents from any loss, liability, damage, costs, or expenses which they may occur as the result of death, injury or property damage that may arise as a result of the activities taking place under this permit. I further agree that this Waiver, release and assumption of risk is binding upon my heirs and assigns.

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Approved by \_\_\_\_\_

Date: \_\_\_\_\_

Please contact Dan Bartels at [dbartels@bethalto.com](mailto:dbartels@bethalto.com) or Derek Mormino at [dmormino@bethalto.com](mailto:dmormino@bethalto.com) with any questions.