This annual, and greatly anticipated, two-day event offers providers of holistic goods and services an opportunity to display, sample and sell at the Empire State Plaza. OGS-sponsored events, such as the Mystic Fair, held at the Empire State Plaza, serve thousands of State employees and visitors and are intended to be family Friendly.

Vendors and practitioners providing the following are invited to apply to participate:

Visionary Arts and Music
Massage and Healing
Seasonal Products (Halloween/Fall)
Mind, Body, Spirit Items & Services
Gems, Crystals & Stones
Tarot Card Readers
Angel Readers
Psychics
Astrologists

Please Note: Ready-to-eat food vendors and commercial service providers are not eligible to apply.

APPLICATION DEADLINE IS OCTOBER 13, 2026

All applications that are submitted by the above listed deadlines will be considered. Sending an application does not guarantee acceptance into the program. Here's how it works:

- Vendors will be notified via email of their event participation.
- OGS reserves the right to extend deadlines

For additional information please contact Diane Hems:

New York State Office of General Services, Convention & Cultural Events
Tel 518.473.4756 • Diane.Hems@ogs.ny.gov

NEW YORK STATE | Office of General Services

Convention and Cultural Events
Room 120, Concourse
Empire State Plaza
Albany, NY 12242

Vendor Application: 2026 Mystic Fair

Load in begins at 7:00 a.m.

Business Information

Business Name

Contact Name | **Phone** | **Email**

Business Address 1 | **Business Address 2**

City | **State** | **Zip**

How will the items you sell/distribute enhance the spirit and character of the event?

Vehicle & Driver Information

Will your vehicle fit in the V-Lot? (Must be 6ft, 6in or lower in height) ☐ Yes ☐ No

Will you need oversize vehicle parking in P-1N Lot? (For vehicles 6 ft, 6in or higher) ☐ Yes ☐ No

Driver 1 Name (exactly as it appears on license)	**Driver's License:** Issued State & Number	**Make, Model, Year**	**License Plate:** Issued State & Number

Driver 2 Name (exactly as it appears on license)	**Driver's License:** Issued State & Number	**Make, Model, Year**	**License Plate:** Issued State & Number

Permit Agreement

The Permit Agreement, photos of booth setup and signs, along with all insurance certificates, are REQUIRED and must be attached with the Vendor Application.

- Download the Agreement: https://empirestateplaza.ny.gov/permit-agreement
- The Agreement is not applicable for NYS Agencies.
- Vendors wishing to apply for an insurance waiver must meet the terms outlined in Item 12 of the Permit Agreement.

☐ **My permit agreement is already on file** ☐ **My permit agreement is included with this vendor application**

Please include any additional information or questions in the space below:

Options, Fees & Payment

Reader/Practitioner - Basic Booth Space		
10'x15' Tented space with 2 tables and 4 chairs, 110v power, and 1 parking space	☐ $120	Total: $ 0
Additional 15' and 2 additional tables	Qty: x $50	Total: $ 0
Additional Table (per table)	Qty: x $5	Total: $ 0
Additional Parking	Qty: x $10	Total: $ 0
Vendor - Basic Booth Space		
10'x15' Space with 2 tables and 2 chairs, 110v power, and 1 parking space	☐ $100	Total: $ 0
Additional 15' and 2 additional tables	Qty: x $40	Total: $ 0
Additional Table (per table)	Qty: x $5	Total: $ 0
Additional Parking	Qty: x $10	Total: $ 0
	Grand Total:	$ 0

Instructions: Return the completed Vendor Application with the following:

☐ **Payment in Full** Any outstanding payment due to OGS may preclude participation. Payments may be made by check, money order or credit card and made payable to the NYS Office of General Services.

☐ **Signed 2026-2027 Permit Agreement** (if not already on file)

Please make checks or money orders payable to: NYS Office of General Services
Return completed Vendor Application, Permit Agreement and Payment to: diane.hems@ogs.ny.gov

Clear Form

NEW YORK STATE | Office of General Services

Convention and Cultural Events
Room 120, Concourse
Empire State Plaza
Albany, NY 12242

Credit Card Form

Instructions: To pay with your credit card, please complete and return this form with your application.

CARD INFORMATION

Card Type

☐ **AMEX** ☐ **Discover** ☐ **MasterCard** ☐ **VISA**

Business Name: _____

Cardholder First Name: _____ **Cardholder Last Name:** _____

Credit Card Number: _____ - _____ - _____ - _____
(xxxx-xxxx-xxxx-xxxx)

Expiration Date: _____ **CVV2:** _____ **Billing Zip Code:** _____

CHARGE AUTHORIZATION

I hereby authorize the Office of General Services to charge the following amount for the event indicated below.

Event Name: _____

Authorized Amount: **$** _____ **Date:** _____

Name (Print): _____

_____

Signature (The signature section must be completed. Electronic signatures are not accepted.)

For Office Use Only		
Invoice #	**Program**	**Received By**