



VENDOR APPLICATION & CONTACT FORM

CONTACT NAME: _____

CONTACT PHONE: _____

CONTACT EMAIL: _____

BUSINESS NAME: _____

DBA: _____ **EIN:** _____

GE TAX LICENSE NUMBER: _____

BUSINESS DESCRIPTION: _____

FEATURED PRODUCTS OR SERVICES: _____

HEALTH PERMIT NUMBER (IF APPLICABLE): _____

HOST KITCHEN PERMIT NUMBER (IF APPLICABLE): _____

ADDRESS OF CERTIFICED KITCHEN (IF APPLICABLE): _____

BOOTH REQUIREMENTS

VENDORS ARE RESPONSIBLE FOR BRINGING THEIR OWN TABLES, CHAIRS, AND DISPLAYS, AND ENSURING THEY ARE PRESENTABLE AND IN GOOD CONDITION.

ALL TABLES, CHAIRS AND DISPLAYS MUST BE PROPERLY SECURED.

NO ELECTRICITY WILL BE PROVIDED. VENDORS ARE RESPONSIBLE FOR PROVIDING LIGHTING FOR THEIR SECTION.