

(or or #	
Car Tag #_	
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Food Vendor Application

Name of Organization, Company or Booth: Contact Person(s): Address:							
Address:							
Address:City:	State:		Zin:				
Day Phone: C	ell:	Zip;Email;					
Please provide a complete list of all for set-up, and two (2) of food for sale. Pl	od items to be sold at hotos are non-returnab	your booth. A	attach one (1) pho ompanied by an S	oto of your ASE.			
Only items listed above will be considered. Please check all appropriate be		ation could resul	t in the closing of yo	ur booth.			
☐ Food Vendor		10' x 10'	\$35.00 x	=			
☐ Late Fee (If postmarked on or after		10 11 10	\$25.00 x				
☐ Electricity Fee	1		\$15.00 x				
☐ Table, 1 Chair Rental			\$15.00 x				
Non-refundable		То	otal Submitted:				
Please attach a copy of the following: Business License General and Liability insurance							

*** Provide us w/ Facebook, Etsy, or Website and we will list it on our Website ***

Print, attach photos, & send check to: Bethel Methodist Church, 245 Fairview Rd, Stockbridge, GA 30281