

Arts for All Festival ~ May 11, 12, 13, 2012

Food Vendor Application & License Agreement
Non-Profit and For-Profit Organizations

Incomplete or unsigned applications will be returned to Vendor

Name of Organization _____ **OK Tax #** _____

Contact Person _____ **Phone (day)** _____

Address _____ **E-Mail** _____

Alternate Contact _____ **Phone (day)** _____

Address _____

New Sizing Available

Available Space Sizes: 10'x 10' - \$375.00 (1 Space)
 10'x 15' - \$560.00 (1 and ½ Space)
 10'x 20' - \$745.00 (2 Spaces)
 10'x 25' - \$930.00 (2 and ½ Spaces)

1. Tent or Trailer Size including Trailer Tongue & Attached Awnings: _____

2. We will bring _____ Trailer(s). We will bring _____ Tent(s)

3. Size of Spaces you need _____ Number of Spaces you need _____

4. We also need (circle one) 110v 220v 110v and 220v

- a. _____ 110v outlets (please include all equipment such as refrigerators, fans, etc.)
- b. _____ 220v/30 amp outlets (include all equipment)
- c. _____ 220v/50 amp outlets (include all equipment)

3. Total Amps needed _____ (fill in blank).

Other comments: _____

Arts for All Festival 2012, Food Vendor Application & License Agreement

Listed below is my menu and related prices: (Note – Arts for All Festival reserves the exclusive right to sell all cold beverages: Water, Tea, Lemonade, Slushies, Smoothies, Sodas, Floats, and Similar Drinks)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Arts for All Festival reserves the absolute right to accept or reject any vendor application for any reason. Application/Fees must be received or postmarked by **February 24, 2012**. **No application will be processed if the proper fees do not accompany it. Booth space checks deposited and acceptance letters sent early March, 2012.**

I have read the

- Food Vendor Application & License Agreement
- Guidelines for Food Vendors
- Comanche County Health Department Requirements

I will comply fully with all regulations which are incorporated into this Application and Agreement. I have enclosed the appropriate space fees as stated in the application form and proof of insurance liability.

Accepted and Signed

Organization name: _____

By _____ **Title** _____

Date _____

Remember to include your Space Fee and Proof of Insurance to:

Art for All, Inc. P.O. Box 592, Lawton, OK 73502