

OFFICIAL VENDOR APPLICATION

Section 1: Contact Information

Name of Business:
Contact Person:
Address:
Telephone:
Fax:
Mobile No:
Email:



Village of Minoa

Block Party

240 N. Main Street

Minoa, NY 13116

315-656-3100

Attn: Barb Sturick

bsturick@villageofminoa.com

Section 2: Vending is free. Vendors are responsible for supplying their own tents, tables and chairs.

Section 3: Space

Please circle the size space you require: 10 x 10 10 x 20

Section 4: Products Sold

Products to be Sold (our goal is to avoid duplicate products)

1) _____	4) _____
2) _____	5) _____
3) _____	6) _____

Section 5: Terms and Conditions of the Agreement

<p>Vendors must be open and ready for business by 2:00 pm. Food vendors are preferred to remain for the duration of the event. All participants must be off the street at end of event at 9:00 pm Saturday night. Please remember to leave your area as clean as it was when you arrived.</p> <p>I have read and agreed to all the terms listed above.</p> <p>Vendor Signature _____ Date _____</p>	<p>For Official Use Only</p> <p>Forms Status: _____</p> <p>Electrical: _____</p> <p>Propane: _____</p> <p>Insurance: _____</p>
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