

Cascade Locks Park Association Canal Day ~ July 3rd ~ 10am-4pm Vendor Application Form

VENDOR CONTACT INFORMATION

Vendor Name (Last, First): _____

Business Name (if applicable): _____

Address: _____ City _____ State _____ Zip _____

Phone:(____) _____ Email _____

FOOD DESCRIPTION

Please describe your type of concession: _____

Price
Range: _____

All food vendors must be certified by the Health Department

APPLICANT CHECKLIST

- Completed Application
- Check or Money order payable to Cascade Locks Park Association for \$125 **Check #:** _____

APPLICANT AGREEMENT

I herby agree to the rules, regulations, and procedures outlined in the 2010 Canal Day guide. I agree that I am certified by the health department to distribute concession to the public.

Signature: _____ Date: _____

No applications will be accepted after April 16th, 2010
- Limited space available -

Mail completed application to:
Cascade Locks Park Association
248 Ferndale St.
Akron, OH 44304
Attn: Canal Day Art Festival
or email andrea@cascadelocks.org (if emailing, signature must be present)

See attached 2010 Canal Day Vendor's Guide for more information