

Date Balance Received:

South Carolina Apple Festival

Do Not Write Here
Space Numbers

Check #:_

Food Vendor Application

Vendor Company Name:	
Vendor Contact Name:	
Vendor Mailing Address:	Phone:
Retail Sales License Number:	(REQUIRED or Application will be returned)
Vendor email Address:	
Electricity Needed? [] Yes [] No If ye	es, type Needed? [] 110 [] 220 (Limited availability)
All spaces are 10'X10' and ALL spaces a	are \$200.00
How many spaces are you reserving?	
menu items. Priority is given to local and able to send photos of your booth as it will sent after the deadlines listed below. If an be sold and you choose to sell it anyway,	the festival. We do not accept duplicate vendors or d repeat/long term vendors. New vendors, please be l appear at the festival. An acceptance letter will be item is marked off or listed on the letter as not to we reserve the right to shut down your booth with
no refund of deposit or fee. Please see te	estival rules on our website: www.scapplefestival.com
	Use back or attach additional pages.
Vendor Signature:	Date:
May 15, 2023, along with this application and photos or reserved spaces will be opened for new vendors or tho due in our office by July 15, 2023. Mail all to: SC Application of the second sec	of your booth (If new vendor). After June 30, 2023, all non- ose repeat requesting to move to a new location. FULL balance is pple Festival Attn: Christy PO Box 206 Westminster, SC 29693
PLEASE DO NO	OT WRITE BELOW THIS LINE
Date Application Received:	Deposit Amount: Check #:

Balance Amount: