



**2019 GROVE FOOD TRUCK FRIDAYS
VENDOR APPLICATION**

VENDOR NAME: _____

VENDOR ADDRESS: _____

VENDOR CONTACT PHONE #: _____
Vendor must be available via phone during the event.

VENDOR EMAIL: _____

VENDOR WEBSITE : _____

VENDOR FACEBOOK PAGE: _____

VENDOR OKLAHOMA TAX COMMISSION NUMBER: _____

2019 Food Truck Friday Event Schedule

| <u>Date</u> | <u>Focus</u> | <u>Food Truck Fee</u> |
|----------------------------------|--|-----------------------|
| 5/3 | Combat Veterans Motorcycle Association | \$35 |
| 5/31-6/1 | Toes in the Grand Summer Kickoff Festival* <i>*at Grove's Wolf Creek Park</i> | \$100 |
| 6/7 | Big Bass Bash | \$35 |
| 7/5 | 4 th of July Weekend | \$35 |
| 7/12 | Southern Drag Boat Association Block Party | \$35 |
| 7/26 | GLOC Block Party | \$35 |
| 8/2 | Car Show | \$35 |
| 9/6 | TBD | \$35 |
| <u>10/4</u> | <u>Green Country Spyders Jamboree</u> | <u>\$35</u> |
| Pay Individually, Total Cost --- | | \$380 |
| Pay All At Once - by 4/30 --- | | \$325 |

Option 1) Include me in All Events _____

Option 1a) I will pay all at once: _____

Option 1b) I will pay ahead of each event individually:

Option 2) I request to be included in the following individual events, if space is available. I understand that food trucks participating in all events get space priority:

Brief Description of the Items You Propose to Sell:

Note: In order to avoid duplication, some proposed items may not be sold.

Any special needs/requirements? _____

Has Vendor ever been convicted of a felony? _____ Yes _____ No

If Yes, describe the nature of the offense and the punishment or penalty assessed: _____

After close review of the Vendor Application, I certify that the information provided is true and correct to the best of my knowledge. I acknowledge and authorize investigation of all statements contained herein. I understand that misrepresentation or omission of facts is cause for denial of participation in Food Truck Friday events.

Vendor Signature

Date

Include with this application (1) a copy of your Liability Insurance listing the Grove Convention & Tourism Bureau as additional insured and (2) the attached Oklahoma Health Department Food Vendor Special Event Form.

Applications should be returned to the Grove Area Chamber of Commerce at 9630 US Hwy 59, Grove OK 74344 or emailed to donniecraingacc@gmail.com.