



# 2024 TOES IN THE GRAND FOOD VENDOR APPLICATION



Contact Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Vendor Contact Phone: \_\_\_\_\_

Vendor Email: \_\_\_\_\_

Vendor Website: \_\_\_\_\_

Vendor OK Tax Commission Sales Tax: \_\_\_\_\_

Vendor FEIN or Social Security: \_\_\_\_\_

Brief Description of the items you propose to sell: \_\_\_\_\_

Note: To avoid duplication, some proposed items may not be sold

Any special requirements? \_\_\_\_\_

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.

\_\_\_\_\_  
Vendor Signature

\_\_\_\_\_  
Date

**Include with this application a copy of your Liability Insurance listing the Grove Area Chamber of Commerce as additional insured. Cost for participation is \$300 and is due upon receipt of vendor application. Check should be made out to Grove Area Chamber of Commerce. No applications will be taken after May 30, 2024.**

Applications should be returned to Grove Area Chamber of Commerce at 111 W. 3<sup>rd</sup> St., Grove, OK 74344 or emailed to [grovechamberevents@gmail.com](mailto:grovechamberevents@gmail.com). For more details, call 918-786-9079.