



Event: Food Vendors Application

Description: Apply to sell your best colinary treats

Date & Time: September 23rd-26th, 2010

Vendor Name: _____

Address: _____ **City:** _____

State: _____ **Zip:** _____

Contact: _____ **Phone:** _____

Email: _____

Entry Fees:

___ In County Profit \$300.00

___ Out of County Profit \$350.00

___ In County Not for Profit \$200.00

___ Out of County Not for Profit \$250.00

Checks Payable to: Oktoberfest 2010

Vendor Requirments:

Booth Size: (include sketch of with service area)

Electrical: (please be specific on requirements, plug type)

Water Hookup: Yes / No

- Faucets for all vendors are available to fill buckets but constant and/or steady pressure cannot be guaranteed even for hoses that are hooked up.
- Access to water and electricity are limited by the number of hookups and the distance to those hookups. Proper size extension cords and extra hose are highly recommended.

Type of Concession: (list of all products to be sold, some restrictions may apply)

Other Needs: _____

Sales tax Permit Number / Not For Profit 503C _____

If tax exempt give complete name of organization and reason for exemption

**Please mail entry fees and completed entry forms to
Oktemberfest, Food Vendor, C/O Tom Wahl,
PO Box 1616, Marshalltown, IA 50158.**