



2017 Almond Blossom

Festival Vendor Application

Vendor Application Page 2 Detail

Information

Organization Name _____

Contact Name _____

To place all of our vendors in appropriate locations and to avoid any duplication next to another booth please provide us with the following detailed information:

General Vendors

Type of Organization _____

Merchandise or Services Sold Yes/No

If Yes: Type of merchandise or services sold or offered

Food Vendors

Type of Food Sold

Detailed Menu

Please remember to be courteous to your fellow vendors and the QH Chamber Representatives. Respect your neighbors and keep your booth contents within your purchased space. It is our primary goal for everyone involved to have a successful event and come together for the community. We appreciate your participation and contribution.

I acknowledge that I have received, read and agree to all the Rules and Regulations as a participating vendor of the 2017 Almond Blossom Festival

Printed Name _____

Signature: _____

Date _____