Food Vendor Agreement

Taste of Wilson County ▪ Thursday October 25, 2018
5:30 p.m. – 8:00 p.m. ▪ The Wilson County Expo Center
www.tasteofwilsoncounty.com

There is no fee for food vendor participation.

Space is limited and is available on a first-come basis. Reserve your spot by returning this vendor agreement by September 7, 2018. All vendors must be operating in the food or beverage industry. The county health inspector will require all vendors to have a valid health permit and abide by current health codes for preparing and serving food.

Food Vendor:_____ Contact Person:_____

Address:_____

Phone: _____ _____ Email :_____

What items will you serve at the Taste of Wilson County? You can choose items in any category listed below.
Beverage, appetizer, entrée, dessert or specialty items.

1)_____ 3)_____

2)_____ 4)_____

Each vendor will be contacted prior to the event to confirm food choices.

Vendor agrees to furnish ***bite-size portions*** of the food or beverage items listed above.
Vendor is responsible for preparing and serving food in appropriate dishes. Please be prepared to serve 1000.

NO ALCOHOLIC BEVERAGES ALLOWED

Taste of Wilson County agrees to provide a 10X8 booth space with two (2) 6-foot tables, (2) chairs, (2) tablecloths, serving plates, bowls and utensils. **Vendor set-up hours are from 1:00 p.m. to 4:00 p.m.**

There will be a walk through by the TOWC planning committee at 4:00; vendors must be set up at 4:00.

Vendors are responsible for clean up and trash removal after the event, leaving table, cloth, lanyard and chairs in booth. Vendors will receive two (4) passes for staff to work the event. Additional tickets may be purchased for $10.00 in advance and $25.00 the day of the event.

If electricity is needed there will be an additional charge of $10.00 and will be available on a first come basis.

I _____ need access to electricity. Please list the items needing electricity below.
Do/Do Not

_____ _____
Vendor Signature and Date TOWC Signature and Date

For Office Use: Date Received ____ ___ Payment Received _____ Booth Space #_____