



Food Vendor Application

Friday, June 11, 2021

Name of Company: _____

Contact Person: _____

Address: _____

Phone #'s: Work _____ Home _____ Cell _____

Fax _____ Email _____

Emergency number to reach you on event day in case of cancellation due to inclement weather, etc. _____

Brief description of your booth/food truck: _____

Note to food vendors: Please list preferred items to be sold and prices. Health department food permits will be expected and insurance is required. All state mandated Covid-19 protocols must be followed.

Item: _____

Price: _____

There is a \$25.00 participation fee.

NOTE: It is imperative that you complete this form completely and return it to the address below before April 1, 2021. You will be sent a follow-up email with pertinent information, including location and map of evening events. This application is for Friday night 6:00- 9:30 p.m. and does not include Saturday, June 12th.

Please return this form with your \$25 check to:

Event Allies C/O Julie Wenger 164 Christina Landing Drive

Wilmington, DE 19801

Phone: 302-545-8305

Email: jwenger@eventallies.com