

## 6th Annual Taylorsville Apple Blossom Festival

## Saturday, May 4th, 2024

Application Form: Read carefully and submit with booth fee and town event fee A.S.A.P

Contact Person:					
Mailing Address:					
City:	State:	Zip:			
Telephone:	Email Address:				
Type of Display:  Must Check One: Food Vendor			(A	ALL must	t explain be
Food Vendors list all foods being served	or attach a menu t	to this form			
Electric Needed: Yes (each No	plug supports 3 ap	pliances only it i Using Ov	s 110V vn Ge	V) nerator:	
I have read the rules and regulations and	I agree:	Signature (p	olease :	sign)	
PLEASE MAIL COMPLETED APPL			OTO	WN EVE	ENT FEE (
PO Box	sville Apple Festiva x 87 sville, NC 28681	ii iiic.			
PO Box	x 87 sville, NC 28681 <b>d their representati</b>	ives, the Town oj			
PO Bo: Taylors *The Taylorsville Apple Festival Inc, an	x 87 sville, NC 28681 d their representati ble for personal inj	ives, the Town oj jury, loss, or dan	iage to	persono	
*The Taylorsville Apple Festival Inc, an County Government will not be responsi	x 87 sville, NC 28681 d their representatible for personal inj 01/24) #_ UST INCLUDE WI' ofit-\$0 / Food Veno	ives, the Town of jury, loss, or dan Booths TH FEE IF APPI dor-\$25 / Carniv	x X LICAE	\$85 BLE) les-\$25"	
*The Taylorsville Apple Festival Inc, an County Government will not be responsi  1. Registration Fee: (if received by 04/2  2. Town of Taylorsville Event Fee: (MU "Product Sales Vendor-\$10 / Non-Product Sales Vendor-\$	x 87 sville, NC 28681  d their representation ble for personal injustion 01/24) #_ UST INCLUDE Wird ofit-\$0 / Food Vencenter the Correct To #_	ives, the Town of jury, loss, or dan Booths TH FEE IF APPI dor-\$25 / Carniv	X LICAE val Ric	\$85 BLE) les-\$25"	al property \$

\*\*\*\*ALL SPACES ARE ON FIRST COME, FIRST SERVE BASIS. ANYTHING EXCEEDING
<u>"12 FEET"</u> WILL BE CHARGED FOR AN ADDITIONAL SPACE. MAKE SURE TO INCLUDE
TRAILER AND HITCH WHEN CALCULATING YOUR SPACES!!!!!!\*\*\*