Satt Application Form	m: Read carefully and sul	mit with book	th fee and i	town	event fee	
Business/Organization:						
Contact Person:						
Mailing Address:						
City:	State	: Z	Cip:			
Telephone:	Email Add	ress:				
Type of Display: Must Check One:	Food Vendor Craft Ven	dor: C	Other:	(A	LL must	explair
Food Vou doug list all food	s being served or attach a	nenu to this f	orm			
Food vendors list all jood						
Electric Needed: YesNo	(each plug suppor	s 3 appliance	es only it is Using Own			
Electric Needed: Yes	(each plug suppor	s 3 appliance		ı Gen	erator:	
Electric Needed: Yes No	(each plug suppor	s 3 appliance Si REGISTRAT Festival Inc.	Using Own	n Gen ease s	ign)	
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Electric Needed: Yes No I have read the rules and re PLEASE MAIL COMPL <u>ONE PAYMENT</u>) TO: *The Taylorsville Apple F	(each plug suppor egulations and I agree: LETED APPLICATION, Taylorsville Apple PO Box 87 Taylorsville, NC 23 Sestival Inc, and their repre- not be responsible for perso	s 3 appliance Si REGISTRAT Festival Inc. 681 <i>sentatives, the</i>	Using Own gnature (pla TION AND e Town of T ss, or dama	n Gen ease s TOV Faylou uge to	ign) VN EVE	NT FE
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Electric Needed: Yes No I have read the rules and re PLEASE MAIL COMPL <u>ONE PAYMENT</u>) TO: *The Taylorsville Apple F County Government will n 1. Registration Fee: (if re 2. Town of Taylorsville E	(each plug suppor egulations and I agree: LETED APPLICATION, Taylorsville Apple PO Box 87 Taylorsville, NC 23 Sestival Inc, and their repro- tot be responsible for personant eccived by 04/01/23) Event Fee: (MUST INCLU -\$10 / Non-Profit-\$0 / Foo Enter the Corr	s 3 appliance Si REGISTRAT Festival Inc. 681 sentatives, the nal injury, lo # DE WITH FEI d Vendor-\$25 ect Town Eve #	Using Own gnature (pla TON AND TON AND TON AND Booths E IF APPLI 5 / Carniva	a Gen case s TOV <i>Taylor</i> <i>tage to</i> X CAB I Rid	ign) VN EVE rsville an persona \$85 LE) es-\$25"	NT FE

TRAILER AND HITCH WHEN CALCULATING YOUR SPACES!!!!!!***