

FLAT ROCK SUMMER BLAST
JUNE 9-10-11, 2017
APPLICATION FOR FOOD CONCESSION SPACE

Name of Business: _____

Name of Owner: _____

Address: _____

Phone: _____ (home) _____ (cell) _____ (work)

Concession Exhibit Space:

Size of Trailer: _____ Serving end: _____ x _____ Front or side serve?: _____

Electric Hookups and Amps Needed: _____

Stock Truck Parking: Yes ___ No ___

Required Hookup: Yes ___ No ___

Amps Needed: _____

Menu:

No application will be accepted unless a **complete menu** is listed or attached to application. Menu **must** be submitted to and approved by Food Vendor Chairman.

Insurance:

You will need liability insurance coverage in the amount of \$1,000,000 with Flat Rock Community Foundation named as additional insured.

Note: Receipt of this information does not imply nor insure exhibit space will be available for the current year. If you are selected as a food vendor, you will be contacted and requested to submit application, proof of insurance, and required fees.

This information will remain on file for three (3) years. After this time, it will be your responsibility to re-apply by submitting another application. **Please include a photo of your set up and your menu with your application.**

APPLICATIONS MUST BE SUBMITTED VIA EMAIL ONLY to festival Food Chairman, John Scott: jdscott13@charter.net

If you have further questions please contact John Scott at 313-910-9013, or via email: jdscott13@charter.net. For more information visit the festival website at www.flatrockriverfest.com.

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Application and pictures ___ Menu ___ Date _____ Accepted Y ___ N ___