



ELKHORN HOLIDAY CRAFT BASH

SATURDAY, OCTOBER 5, 2024 - WALWORTH COUNTY FAIRGROUNDS - 9A-4P

Presented by Walworth County Fair's Award-Winning Barnyard Adventure Agriculture Education Team

WALWORTH COUNTY FAIRGROUNDS

411 East Court Street

Elkhorn, Wisconsin

Contact: elkhornholidaycraftbash@gmail.com - (262) 723-3228

OUTDOOR FOOD VENDOR APPLICATION

THIS IS NOT A CONTRACT. A limited number of food vendors will be accepted. If your application is approved, you will be contacted by an Elkhorn Holiday Craft Bash representative with further details.

Outdoor Food Vendor Space Cost: \$85 flat fee

Please type or print clearly in ink.

APPLICATION DUE: JUNE 1, 2024

CONTACT INFORMATION:

Legal Business Name: _____

DBA: _____ TIN NUMBER/SS#: _____

Name of Owner: _____

Name of Manager: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: (____) _____ Cell Phone (Required): (____) _____

Email (Required): _____ Fax: (____) _____

Website: _____

Social Media: Yes or No

OUTSIDE FOOD CONCESSIONAIRE TRUCK OR TRAILER (self-contained) (circle one):

Approximate footage needed: Frontage _____ feet x Depth _____ feet

(Must include awnings, overhangs, trailer hitches, tent stakes, etc.; total area utilized.)

Please indicate the side(s) of your unit that you will be serving out of, if applicable: _____

Is the tongue removable: Yes or No

ELECTRICAL NEEDS:

Do you need electrical hookup: Yes or No

_____ AMPS - 110v

_____ AMPS - 220v

FOOD ITEMS:

List ALL food and beverages to be sold. Please be specific.

Please include a photo of the food truck or trailer with your application.

REFERENCES:

Please list three references of events you have sold your product at:

- 1.
- 2.
- 3.

We will review each application. We reserve the right to accept or reject any application based upon the uniqueness and quality of products sold, appearance of food truck or trailer, and references provided.

SIGNATURE:

I CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS COMPLETE AND TRUE,
TO THE BEST OF MY KNOWLEDGE:

(Signature of owner, as stated on front)

(Date)

PLEASE RETURN THIS COMPLETED FORM TO:

WALWORTH COUNTY FAIRGROUNDS

ATTENTION: ELKHORN HOLIDAY CRAFT BASH

PO BOX 286

ELKHORN, WI 53121-0286