

For office use only				
Date Paid				
Amount Paid				
CK #			Cash	
Visa	MC	Am	ex	
Ins			Vendor Ins.	

2023

Outside Food Vendor Application

Please print/Type and ref	turn with payment			
Business Name				
Contact Person	Phone			
Mailing Address				
City	ST	Zip		
Email Address				
Product(s) to be sold/E	xhibited			
All Booth spaces measurement- N	s are <mark>20X20</mark> - Your complete set-up in I O EXCEPTIONS	ncluding tongue must fit within this		
Booth Rates -\$400.00 Groups)	per 20'X20' Space Plus 10% Con	nmission on all sales to TVE (5% Non Profit		
Payments can be ma	de online at <u>www.tvefair.com</u> 8	Application submitted to info@tvefair.com		
If paying by check make	e checks payable to TVE			
Applicants Signature: _		Date		
	Please return to: TVE- Vendo	r Committee		
	P.O. Box 9047 Liberty, TX 77575	936-336-7455		

Application due by July. 28th- (letting us know if you want a spot) Payment Deadline- August 31, 2023