For office use only				
Date Paid				
Amount Paid				
СК #			Cash	
Visa	МС	Ame	×	
Ins			Vendor Ins.	



2024

Outside Food Vendor Application

Please print/Type and return with payment				
Business Name				
Contact Person	Phone			
Mailing Address				
City	ST	Zip		
Email Address				
Product(s) to be sold/Ex	hibited			
All Booth spaces measurement- No	· · ·	including tongue must fit within this		
Booth Rates -\$400.00 Groups)	per 20'X20' Space Plus 10% Co	ommission on all sales to TVE (5% Non Profit		
If wanting a permaner	nt booth (not a trailer spot) ple	ease note that on the application		
Payments will be mad	le online after bring approved	l and invoice will be sent via email		
Applicants Signature:		Date		
	Please return to: TVE- Vend	dor Committee info@tvefair.com		
	P.O. Box 9047 Liberty, TX 77575	5 936-336-7455		

Payment Deadline- August 31, 2024 if chosen to get a spot