



FOOD AND RETAIL VENDOR APPLICATION

Business Name: _____

Contact Name: _____

Phone: _____

Email: _____

Address: _____

What I Am Selling: _____

RETAIL VENDOR FEE \$50.00 FOOD VENDOR FEE: \$75.00
CHECK, CASH OR MONEY ORDER ONLY.

Sign and date that you understand the event policies and will comply.

Name: _____ Date: _____

Please email us with any questions: krista.mcclenny@tyronega.gov
Please remit form and payment to: Tyrone Recreation 145 Commerce Dr. Tyrone GA 30290