

**VFW Auxiliary Post 9210**

 **Inaugural Black Pot Cook - Off**

**Vendor Application Form**

**Event Details:**

Event Name: VFW Auxiliary Black Pot Cook - Off

Date: April 20th,2024

Time: 11am-3pm

Location: Youngsville Sports Complex Soccer Parking Lot

**Vendor Information:**

* Business/Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vendor Type:** (Please check the appropriate box)

* Craft Vendor
* Other Vendor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Menu:** (List the items you plan to sell. Please no food or drinks unless approved.

1. Item: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price: $\_\_\_\_\_\_\_\_\_\_
2. Item: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price: $\_\_\_\_\_\_\_\_\_\_
3. Item: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price: $\_\_\_\_\_\_\_\_\_\_
4. Item: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Price: $\_\_\_\_\_\_\_\_\_\_

**Vendor Space Requirements:**

* Space Size 10 X10 tent space. All Vendors must provide their own tent and table. (Tent not required)
* Electricity not provided.

**Vendor Setup:**

* Setup Time: as early as 8am and tear down is at 3:00pm

**Health and Safety:**

* All vendors must comply with local health and safety regulations.
* Vendors are responsible for their own waste disposal.

**Agreement:** By signing below, you agree to the following terms and conditions:

* Vendors must provide Raffle Basket.
* You will set up and tear down your booth within the specified times.
* You will adhere to all health and safety regulations.
* You will conduct yourself in a respectful manner towards event attendees, staff, and other vendors.
* No generators will be allowed.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Payment:**

* Booth Fee: $25.00 (Please make checks payable to VFW Post 9210 and mailed to P.O. Box 8 Youngsville, LA 70592)
* Payment Confirmation: [ ] Check #\_\_\_\_\_\_ [ ] VENMO\_\_\_\_\_\_\_\_\_\_\_\_\_(@Auxiliary9210)
* On Payment please specify Black Pot Cook – Off Vendor

For any inquiries or assistance, please contact Amber Broussard at (337) 858-7884 or Michele Aymond (469) 387-2871.

You can email your form to vfw9210events@gmail.com

Please submit this form by April 13th to secure your spot as a vendor at the VFW Auxiliary Black Pot Cook - Off. Thank you for your participation!