



**APPLICATION FOR THE 29th ANNUAL
MOUNTAIN STATE APPLE HARVEST FESTIVAL
ARTS & CRAFTS SHOW, OCTOBER 18th & 19th, 2008
FOOD VENDOR**

Applications must be received by May 10th, 2008

It is imperative that we receive your application by this date! We do have a waiting list. If it is not received by this date, it is a first come, first served basis; you may lose your spot.

CONCESSION NAME: _____ OWNER(S) NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: _____ BUSINESS PHONE: _____
EMAIL ADDRESS: _____
NEED ELECTRIC: YES: NO: AMPS REQUIRED: _____
HEALTH PERMIT #: _____

Please include a menu or list the type(s) of food and drinks your concession will be selling. Since space is limited, this will help us determine which vendors will provide the best variety of food to our customers.

SEND NO MONEY WITH YOUR APPLICATION. If approved, you will receive an approval letter which will include the amount to be paid.

Self Contained (\$250.00) Need Electricity (\$325.00)
Number of Spaces: _____
 I would like same space(s) as last year.

All food vendors will be required to have a Certificate of Insurance and a Health Permit. Please send a copy of your insurance certificate and health permit with your completed application. If you do not have these items by the dates of the show, you will not be able to participate.

Please Mail Completed Application, Certificate of Insurance & Health Permit to:
Mountain State Apple Harvest Festival
P O Box 577
Kearneysville, WV 25430

We thank you for your interest in the Mountain State Apple Harvest Festival.