

Trick-or-Treat the Trail

Food Vendor Application

Due no later than October 15, 2018

Please fill out the food vendor form below:

Vendor/Group Name: _____

Representative Name: _____

Mailing Address: _____ City: _____

Zip Code: _____ Work Phone #: _____

Cell Phone #: _____ Email: _____

Size of Food Truck/Space Needed: _____

Please indicate the items which you will be selling:

| Vendor Menu Items | Commercially Prepared Items | Non Food Items |
|-------------------|-----------------------------|----------------|
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Fee: \$25.00 (Payable by cash or check made payable to Town of Winterville); refundable if the event is canceled by the Winterville Parks and Recreation Department.

By Mail:

Winterville Parks and Recreation
P.O. Box 1459
Winterville, NC 28590

By Email:

ian.mcleod@wintervillenc.com

Parks and Recreation Office

2936 Church Street
Winterville, NC 28590

Signature: _____

Date: _____

If you have any questions please contact the Winterville Parks and Recreation office at 252-756-1487 or visit us online at wintervillenc.com

