





## APPLE PIE JAMBOREE FOOD VENDOR APPLICATION

Company Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Complete and return this form and return with your check and proof of insurance.

Make checks out to: Apple Pie Jamboree

Mail to: PO Box 554, Pateros, WA 98846

\*\*\*\* PLEASE READ AND SIGN\*\*\*\*

**YOUR APPLICATION WILL NOT BE ACCEPTED WITHOUT A SIGNATURE**

I hereby release the Apple Pie Jamboree Committee and the City of Pateros from any liability that might occur during this event.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

If you have a contact of someone who might be interested in joining this event write their name and address below and we will send them an invitation:

Name of company: \_\_\_\_\_

Item they sell: \_\_\_\_\_

Address or contact information: \_\_\_\_\_