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Complete and send this application, along with your check, to
Food Vendor Application
The Art Village
PO Box 806
Versailles, KY 40383
TheArtVillageInc@gmail.com

Food Vendor Application

Owners Name:

Company Name

Complete Address (Street, City, State)

Email

Phone

Summary and Agreement

- __ Yes, I have read, understand & agree to follow Vendor Policies & Procedures
- __ Yes, I have read, understand & agree to follow the acceptance agreement
- __ Yes, I have enclosed my booth fee.
- __ Yes, I have submitted a photo of my set up for the committee.
- __ Yes I have included a copy of my menu.
- __ Yes, I will bring a copy of my Kentucky tax ID to the festival.

By signing here, I show I have read, understand and agree with the rules and regulations of the The Art Village Please include the date you sign

Picture of your booth/truck

No file chosen

Your Menu

No file chosen