



Vendor Application

**FOOD VENDOR \$100 DEPOSIT
MUST PROVIDE AT LEAST 400 FREE SAMPLES- MUST PROVIDE A TENT FOR BOOTH**

BUSINESS NAME: _____

CONTACT NAME: _____

PHONE: _____ EMAIL: _____

ADDRESS: _____

PAYMENT TYPE: CHECK CASH CREDIT CARD

CREDIT CARD NUMBER: _____

EXP. DATE: _____ CVV: _____ ZIP: _____

CARD HOLDER SIGNATURE: _____

THE WILLIAMSON COUNTY AND CITIES HEALTH DISTRICT REQUIRES EACH FOOD BOOTH TO APPLY FOR A TEMPORARY FOOD ESTABLISHMENT (TFE) PERMIT. YOU MUST TURN IN THE REQUIRED PAPERWORK TO THE **CEDAR PARK CHAMBER OF COMMERCE** BY SEPTEMBER 15, 2024.

PLEASE SUBMIT THE COMPLETED FORM BY EMAIL TO ERIKA@CEDARPARKCHAMBER.ORG OR DELIVER IT IN PERSON TO OUR OFFICE AT: 1460 E. WHITESTONE BLVD. SUITE 180, CEDAR PARK TX 78613 BY SEPTEMBER 15TH

THIS IS AN OUTDOOR EVENT; THE RESTAURANT IS RESPONSIBLE FOR BRINGING THEIR OWN TENT TO COVER FOOD AS REQUIRED BY THE HEALTH DEPARTMENT. THE CEDAR PARK CHAMBER MAY PROVIDE ONE 110 OUTLET, ACCES TO WASH STATIONS & ICE.

FOR MORE INFORMATION, PLEASE CONTACT ERIKA SAINOS AT (512) 260 7800 OR EMAIL ERIKA@CEDARPARKCHAMBER.ORG