



# Lee County Fair Food Vendor Application

Date: \_\_\_\_\_

AMP Service – Select one: \_\_\_\_\_ 20 AMP - \$300 \_\_\_\_\_ 30 AMP - \$400 \_\_\_\_\_ 50 AMP - \$500

Organization or Business Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Food prices must be stated. Menu and pricing are subject to approval by the event. List food items, followed by price.

List appliances that need amp requirements and total amps needed.

List any other items you will be using. Examples: tent, food trailer, etc.

I acknowledge my organization has read the Lee County Fair Association Policy & Operating Procedures set forth for all food vendors, and we hereby agree to comply with all rules and regulations. The person signing below as the Responsible Party is responsible for the information provided in this application and for ensuring all persons representing this vendor comply with all rules and regulations.

**HOLD HARMLESS**

I agree that no person in my organization will hold the Lee County Fair Association, or any of its volunteers, members of committees, or providers of the event, responsible for any loss, damage, theft, or personal injury incurred as a participant in this event.

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Signature

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Print Name

