



2019 Zombie Run & Fall Fest Food Vendor Application

Name: _____

Business Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home () _____ Work/Cell: () _____

Email Address: _____

Please describe the food(s) you will be selling:

Please Circle One: Food Vendor Food Truck

Please list size of area needed for your set-up/Food Truck: _____

Price Range of Product(s): _____

Fee: 20% of total sales with a \$100 minimum fee (whichever is larger). Form & Payment are due by October 23, 2019.

Vendor is responsible for set-up, tables/display, tent/awning & security of tent/awning. There is no electric or water hook-ups.

I agree that Lebanon High School, Lebanon Band Boosters, and Lebanon Band Zombie Run & Fall Fest, will not be held liable for the loss, theft, or damage to any goods, personal property, or for injury to persons or property within the area of the booth leased by me. I expressly agree to be responsible for security at my booth, and to keep the area within the booth free of debris, obstructions, or other hazards that might result in injury to the public. I will not deface, damage, move, or injure the exhibition space or booth space. I will pay the cost of repairing any damage or injury done to the exhibition facility and surrounding grounds.

Merchant's Name (Please Print): _____

Merchant's Signature: _____ Date: _____

Lebanon Band Booster Signature: _____ Date: _____

Please send completed form and payment to:
Lebanon Band Boosters, P.O. Box 206, Lebanon, TN 37088

Lebanon High School Band Boosters Contact Name and Info:
Susan Solbrig
615-497-7990
lhsbandboosters615@gmail.com