

FOOD VENDOR APPLICATION

Name of organization/company\_\_\_\_\_

Trade name on vending booth\_\_\_\_\_

Contact person\_\_\_\_\_

Address\_\_\_\_\_City\_\_\_\_\_State\_\_\_\_\_Zip code\_\_\_\_\_

Telephone ( )\_\_\_\_\_Fax ( )\_\_\_\_\_

Email\_\_\_\_\_

Website [www.](#)\_\_\_\_\_

Concession/products(s)\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The festival vendor fee is \$50. All food vendors must also complete an application to obtain a temporary food establishment permit with District Health Department #10. The health department fee is \$60.

Please make the \$50 check payable to the Idlewild Foundation and mail the check and the food vendor application to the Idlewild Foundation, 1150 Griswold, Suite 2100, Detroit, Michigan 48226 on or before June 1, 2008.

Upon receipt of the application and the \$50 payment we will mail to you the health department application and the operations checklist. The health department application must be submitted to the health department on or before June 15, 2008.

Should you have any questions, please do not hesitate to contact our offices at (313) 965-0505.