

MOBILE FOOD VENDOR APPLICATION & CONTRACT

Applicant information (Please type or print all information)

Name of Mobile Food Vendor: _____

Contact

Name: _____

Phone: _____ Cell: _____

Email (required): _____

On-site Contact Name: _____

Mobile Unit Length: _____

If a trailer, please include your tow vehicle in the measurement given.

MOBILE FOOD VENDOR DETAILS:

Description of menu. _____

INSURANCE INFORMATION:

Insurance

Company: _____

Policy #: _____

Driver's License State: _____

Driver's License #: _____

****Please note: You MUST include a COI listing Friends of Fred LLC as additionally insured with your application****

Do you use social media to promote your business? Please list your ID so we can tag you in our marketing efforts.

Facebook: _____

Twitter: _____

Instagram: _____

Other: _____



Fee & Payment

Event Registration Fee.....\$100

The registration fee is only refundable if the event cancels.

**Trucks will pay 10% of gross at the end of the event - the \$100 registration fee will be subtracted from the amount due.

Pay electronically - Cash App - \$FriendsOfFred or Venmo - @FriendsOfFred

Pay by Check - Made out to Friends of Fred LLC
Mailed to: 40 Northgren Pkwy
Brownsburg, IN 46112

Pay by Credit/Debit Card

By supplying the following information, I agree to my credit card being charged the full non-refundable fee + 3.5% convenience fee=\$103.50

Name on Credit Card: _____

Card #: _____

Exp. Date: _____ CVV Code: _____

Billing Zip Code: _____

Signature: _____

Email us @ FriendsOfFredIndy@gmail.com with any questions - subject line Battle Question.

Completed applications and COI's should be submitted electronically here:

<https://forms.gle/C8DhYYi6ju2hd62e9>

or Emailed w/subject line Tri-State Battle to FriendsOfFredIndy@gmail.com or

Mailed to the address in Brownsburg shown above.