

FRIO FEST

Vendor Application

VENDOR NAME:

MAILING ADDRESS:

PROPRIOTOR NAME: _____ PHONE: _____

NAME OF PERSONEL WORKING: (PLEASE PRINT)

1. _____
2. _____
3. _____
4. _____

LIST CATEGORY: (FOOD, CLOTHING, JEWELRY, GAMES, ETC.)

UNDER FOOD

HEALTH DEPT CERTIFICATE #: _____ DATE: _____

EACH CATEGORY REQUIRES A SEPEARTE APPLICATION.

SEND APPLICATION AND FEE OF \$35.00 PER CATEGORY TO

FRIO COUNTRY RESORT PO BOX 140 CONCAN, TX 78838

FOR MORE INFORMATION CALL 830.232.6625 OR VISIT WWW.FRIOFEST.COM