GRIER MUSIC FEST IV July 6, 2024 VENDOR APPLICATION FORM

Name	Pho:	ne	
Business Name / Organization			
Mailing Address			
City	State	Zip Code	
VENDOR ITEMS Please list	all food items or merchandise for sa	ıle.	
1	6		
2	7		
3	8		
4	9		
5	10		
	rworldcc@gmail.com of the following: Cashapp \$Gi	rierworldcc Paypal <u>Grierworldcc@gmail.com</u> ation PO Box 152 Idlewild, MI 49642	
	health department. A temporary foo	artment Permit: All food vendors are required od permit can be obtained from the Lake Cour	
not responsible for any damage	EMENT: The applicant acknowledge or loss of personal property belong as a consequence of such possible of	ges that Grier World Cultural Communications is ging to the applicant and waives any claim damage or loss.	
For more information contact	Kyle Grier at (404) 921-8911 , or ea	mail: Grierworldcc@gmail.com	
VENDOR SIGNATURE:		DATE:	
VENDOR Name/Title (Type of	or Print):		