



OCTOBER 12TH - 16TH, 2011
HENDERSON PAVILION
HENDERSON, NEVADA

Food Vendor Application

* This application **MUST BE COMPELETED** in order to be considered for this event.

Name: _____

Company Name: _____

Address: _____

City, State, Zip code: _____

Phone: _____

Cellular Phone: _____

Fax: _____

E-mail: _____

Federal Tax ID/ Social Security#: _____

Reference: (please provide three): _____

Do you have Insurance Coverage? **YES** **NO**

Are you interested in being Exclusive? **YES** **NO**

Do you have a tent: **YES** **NO**

Do you have a power generator? **YES** **NO**

Do you have a Catering Truck? **YES** **NO**

Number of trucks: _____

Dimension of truck: _____

Power needs: _____



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Space requirement: _____

Number of working staff: _____

Past Experience:(Please provide a list of past events)

Description of Material to be sold or distributed

***Please complete and e-mail, mail or fax the form with a photo of your set up to:**

**Attn: Jessica Saylor / Stacey Perez
Lili Claire Communications
3540 West Sahara Ave., #182
Las Vegas, NV 89102
Tel: 702.862.8141
Fax: 702.862.4663**

**www.nevadawildfest.com
vending@nevadawildfest.com "Food Vendor Application" in subject line.**

We will email you to confirm when we have received your application within 1 week of its arrival.

*The Nevada Wild Fest is produced by Lili Claire Communications, a 501(c)(3) non-profit organization. Tax ID #26-1125375. The Nevada Wild Fest's charity of choice is The Lili Claire Foundation, which provides hope, answers and help to special needs children and the families who love them. For more information on Lili Claire, please visit www.liliclairefoundation.org.