



**CITY OF GREENSBORO AND  
NC A&T ALUMNI ASSOCIATION, INC.  
2007 A&T HOMECOMING PAVILION VENDOR APPLICATION**

**PLEASE PRINT**

Name:

Current address:

City:

State:

ZIP Code:

Phone:

Cell Phone:

E-mail:

**INFORMATION / REQUIREMENTS**

**Food**    

**Merchandise**    

**Both**    

**What are the products to be sold?**

**Food vendors must submit a pre-approval form from the Guilford County Health Department with this application.**

**What are the measurements of your tent, trailer, van, etc. in feet?** Be sure to include trailer hitch if not removable.

\_\_\_\_\_ **ft. WIDE BY** \_\_\_\_\_ **ft. DEEP**

**Please describe your set up** including type (Tent, Trailer, Van, etc.). Attach additional description and/or pictures if necessary.

**Is a water connection required for your setup?**

**Yes or No (Circle one)**

Note: Food vendors receive first consideration for water as a Guilford County Health Department regulation. Prepackaged foods do not require a water hookup.

**Do you intend to move any portion of your trailer or vehicle off the Pavilion at the close of business each day?**

If yes, please describe:

**Yes or No (Circle one)**

**Privilege License fee:**

**\$100.00**

**Space Fee (choose one)**

|                    |                          |       |
|--------------------|--------------------------|-------|
| Merchandise Vendor | 12 x 12 space            | \$100 |
| Merchandise Vendor | 12 x 24 space            | \$150 |
| Food Vendor        | 20 x 20 space            | \$250 |
| Food Vendor        | Oversize* (up to 20 x40) | \$300 |

\$ \_\_\_\_\_

\*Limited availability

**TOTAL DUE**

**APPLICATION CHECK LIST**

**INITIAL BELOW**

I have attached my **non-refundable** money order, certified, cashiers or bank check payable to "City of Greensboro" to this application.

I understand my space assignment will be based on availability and assigned by City of Greensboro staff in the order my application is **received**. I further understand the decisions of the City of Greensboro and A&T Alumni Association are final.

By submitting this application and fee I agree to all terms, conditions, rules and instructions included in the attached cover letter, this application and/or made available to me before and during the event.

I have signed and attached the Vendor's Acknowledgment and Release form.

**I ATTEST THE INFORMATION PROVIDED BY ME ON THIS APPLICATION IS TRUE AND ACCURATE.**

Signature of applicant:

Date:            /            /2007

**City of Greensboro Use Only**

Date Application Received: \_\_\_\_\_, 2007

Selection Order: \_\_\_\_\_

Number(s) Assigned:

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Notes:

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