

Printed Name:

Vendor Application

Applicant Information (Please Print)			
Business Name:			
Contact Name:			
Address:	City:	State: Z	Zip:
Phone:	Secondary Phone:		
Email Address:			
Products For Sale (Please Be S	Specific):		
Description Of Your Set-Up (e.	g. 20' Trailer, 10x10 tent). Etc.:		
Name Of Event You Wish To At	tend:		
	n to: Georgetown – Scott Cou ve, Georgetown, KY 40324. Yo		
•	s to Courtlyn Ledesma cledes	_	m.
Disclaimer			
	Recreation reserves the right to refuse a		
	cted vendors will be notified no later the	·	
	the Registration and payment 1 week pr k or cash that will be donated to George		
The Park. All checks are to be made to	GSC Friends of The Park.		

Signature:

Date: