



October 29-31, 2010 * January 21-23, 2011 * February 18-20,2011

FOOD and BEVERAGE VENDOR APPLICATION

NAME OF BUSINESS : _____

NAME OF OWNER : _____

ADDRESS: _____

CITY : _____ STATE : _____ ZIP : _____

PHONE : _____ CELL : _____

EMAIL : _____

WEBSITE: _____

TYPE OF FOOD : _____ HEALTH PERMIT # _____

CALIFORNIA SELLERS PERMIT # _____

PALM SPRINGS BUSINESS LICENSE # _____

(If you do not have a Palm Springs business license, we will obtain one for you at a cost of \$25.00. yes___ no___)

*SALES :

No booth fee will be charged. FIFTEEN (15%) percent of sales received as result of Festival will be donated by the vendors to the PSAF. Vendors will agree to Festival Regulations requiring the recording of all sales.

NOTE: copies of CA sellers permit, Health Permit, Palm Springs business license and a NON-REFUNDABLE waste removable fee of \$100.00 Must be submitted before space is assigned.

NUMBER OF ADDITIONAL ATTENDING EMPLOYEES : _____

SIGNATURE _____ DATE _____

CIRCLE SHOWS
ATTENDING :
OCTOBER
JANUARY
FEBRUARY

Email: Artists@PSAF.biz On the Web at: www.PSAF.biz Phone: 1-866-611-8617 FAX: 760-772-4316
RETURN TO: Palm Springs Arts Festival, 78206 Varner Road, Suite D-114, Palm Desert, CA 92211-4136