

Great Lakes Folk Festival, August 9–11, 2002 Traditional Food Vendor Application Form

Name of Vendor _____

(as you wish it to appear in print)

Street Address _____

City _____ State _____ Zip _____

Phone (____) _____ Email Address and web address: _____

Contact Person Name (please print) _____

Signature _____

**Yes, I am interested in participating in the Great Lakes Folk Festival as a food vendor.
Please check the boxes below for the vendor information requested.**

Food Court (locations 10' wide and 20' deep, No liquor will be sold in the Food Court)

- Obtain a location as a For Profit vendor
- Obtain a location as a Non Profit vendor
- Obtain a location as a Self Contained Unit

Enclose the following:

- ❖ Deposit as required (see Information Sheet)...Please make your check payable to Michigan State University
- ❖ Sample Menu. (Send a complete, descriptive and accurate menu with prices for approval)
- ❖ Electrical Hook Up Information. Describe your electrical needs below. Complete and accurate information such as number of hookups and amount of volts required is needed. Call (517) 432-4655 with any questions.

Important dates:

April 1, 2002 Application Deadline (with deposit check)
May 1, 2002 Notification of Selection
May 15, 2002 Cancellation Deadline (for full refund of deposit)
August 9, 2002 Required meeting for Food Vendors /Ingham Co. Health Dept.

By Monday, April 1, 2002, please send your completed application, menu, and deposit check to:

William Matt, MSU Museum
West Circle Drive, East Lansing, MI 48824-1045
Telephone: (517) 432-4655 or (517) 432-GLFF
e-mail: mattw@msu.edu , web site : www.greatlakesfolkfest.net

For Questions pertaining to the Taste of Traditions food areas please contact:

Yvonne Lockwood, Michigan State University Museum
Michigan Traditional Arts Program
West Circle Drive, East Lansing, MI 48824-1045
Phone: (517) 353-9678, e-mail: lockwoo2@msu.edu