

Registration Form



QUALIFICATION

- My business operates entirely in Michigan.
- My business is headquartered in Michigan with additional operations outside the state.

CONTACT INFORMATION

Food Truck Name: _____

Contact Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Web/Facebook: _____

WEEKEND RATE

- Early Bird: **\$300**
(before June 1)
- Standard: **\$450**
(June 1-Aug. 31)
- Last Minute: **\$500**
(Sept. 1-15)

	Menu Items Including Drinks	Charge
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

TOTAL \$ _____

Make Checks or Money Order payable to: **Allen Park DDA**

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VEHICLE SPECIFICATIONS

Tell us about your set up:

Food Truck Trailer Food Cart Other _____

How much space will you need? _____

Will you leave your vehicle/set up onsite overnight? Yes No

On what side is your service window located?

Driver's Passenger Other _____

What equipment will you use? Mark all that apply.

Deep Fryers Smokers Grills Ovens Other _____

AGREEMENTS

- I understand that all mobile/trailer vendors are subject to a fire inspection by the Allen Park Fire Dept.
- I understand that all cooking operations must be approved by the APFD, having the authority to revoke any permit if found in violation of the Fire Code Safety Rules.
- I acknowledge I am 100% self-contained and that there will be no electricity or water available.
- I know I will need to provide a certificate of insurance naming the Allen Park Downtown Development Authority as additional insured if I am accepted into the event.
- I have read and agree to abide by the event's terms, conditions, procedures, and rates.
- I have included a check made payable to the Allen Park Downtown Development Authority. I understand my check will be returned to me if I am not accepted into the event.

Signature

Date

Print Name

MAIL TO:

Allen Park Downtown Development Authority
15915 Southfield Road • Allen Park, MI 48101