**FOOD VENDOR REGISTRATION FORM**

I hereby apply as a food vendor for the 2025 Franconia Township Fall Fest.

Fall Fest hours of operation:

Saturday, October 4, 2025, 11:00 AM to 7:00 PM

and Sunday, October 5, 2025 from 11:00 am to 4:00pm.

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Saturday – $125.00 Sunday – $125.00 Both Days - $175.00

**\*\*There will be a $25 late fee for any applications/payments received after Friday, September 26, 2025\*\***

Please make checks payable to:  **Franconia Township PBA**

**Food Information:** Please provide a menu or list of food items you will be serving.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Insurance Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Insurance Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Select one of the following:**

Health Department License: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County License: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PA State License: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ServSafe Certified: \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No Certificate # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rules of Franconia Township Fall Fest

1. No alcohol or smoking on Community Park grounds.
2. All vendors shall exhibit professional manners at all times.
3. Spaces shall be assigned by the Fall Fest vendor coordinator.
4. Tables, canopies, and chairs are the responsibility of the vendor.
5. Vendor is responsible for leaving their area clean at closing.
6. This event will be held rain or shine. No refunds will be issued.

**For the safety of all our guests, food vendors may be required to stop serving shortly before the start of the fireworks display. Failure to comply with any of the rules may result in permit revocation.**

I agree to abide by all Franconia Township Fall Fest rules.

Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return completed application to:

Franconia Township PD

Attn: Susan McKnight

671 Allentown Road

Telford, PA 18969

[events@ftpba.com](mailto:pparaskewik@franconia-township.org)

Office – 215-723-6778 (any questions, ask for Susan)