



Central Brevard Sharing Center Backyard BBQ VENDOR APPLICATION

**April 6, 2019
F. Burton Park, Cocoa, FL 32922**

(Please Print Legible)

Business Name: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Alt #: _____

Email: _____ Resale #: _____

Vendor Type/Participation:

CRAFTER/RETAIL VENDOR - \$25 per space

of spaces needed _____

No electrical power is available on site. Vendors must provide power source if needed.

Please provide a full description of the items you will be selling:

Total Amount Enclosed: _____

Submit payment including all of the appropriate applications to:

Central Brevard Sharing Center

**P.O. Box 3363
Cocoa, FL 32924-3363**

Thank you for your participation. We look forward to partnering with you during this important event. Please come out and join us, we hope to provide an entire day full of fun for the whole family. For more information, visit www.sharingcenterbbqcontest.com or contact Tina Norman cell (321) 508-8920

Applicant assumes full liability for any loss or injury resulting from participating in this event, and further agrees to hold the Central Brevard Sharing Center, F. Burton Park and Brevard County, its agents, contractors and property owners free from liability. All fees are nonrefundable. All fire codes, laws, ordinances and regulations pertinent to health, fire prevention and public safety shall be strictly enforced. All health, fire and safety permits and resale numbers must be on file with the CBSC prior to the event. In the event Brevard County requires fire retardant vendor tents and table coverings, vendor must comply.

Signature _____ Date _____

For CBSC use only: Vendor Type: _____ Date Rec'd: _____ CK/CA/MO

Table # _____ Space # _____ Team # _____