



Carolinas' Thanksgiving Day Parade 2009

Vendor Application/Check List

Vendor Name: _____

Business Name: _____

Address: _____

Home Phone: _____

Cell # on Parade Day: _____

2nd in Command on Parade Day: _____

2nd in Command Cell #: _____

Please submit this application with the items below before October 2, 2009, to ensure your best location for the Parade!

Mecklenburg County Health Dept. Application	\$50 fee (payable to Mecklenburg County Health Department)	Parade Fee (Check or money order payable to Carolinas' Carrousel, Inc. See Vendor Fee Schedule for rates)	Vendor Fee Schedule Form	Location Request Form with 3 locations selected in priority order	Food Menu and/or Inventory of Items to be Sold
If applicable	If applicable	Required for all	Required	Required	Required