

**TomatoFest of Central New York, Inc.
2012 Food Vending
Qualification Statement**

Vendor Name: _____

Mailing Address: _____

E-mail address _____

Phone: Day: _____ Eve: _____

This form MUST be included with your application.

Please list your past experience participating in TomatoFest or any other Festival or Events.

1. Names, dates, locations and approximate attendance of festivals or other events in which you have participated as a vendor.

2. List the products you sold and the Approximate Quantity sold.

3. What experience and training do your staff and volunteers have to ensure product quality, consistency and customer satisfaction?

We accept requests for location preference; however final determination is solely at the discretion of the TomatoFest Food Committee.

Location Request: _____