



108 W. Market St-Second Floor, Taylorville IL. 62568
(217) 824-4919 fax (217) 824-6689 www.chillifest.info

FOOD VENDOR RATE & REGISTRATION SHEET

Name: _____ Phone: () _____
Address: _____
City: _____ State: _____ Zip Code: _____
E-mail Address: _____
FEIN# or SS# _____

This # must be on the application to reserve a space

Items to be sold: _____

Registration Fees

Non Profit (1 item)	\$ 50.00	\$ _____
Non Profit	\$100.00	\$ _____
All others	\$200.00	\$ _____
Electricity charge (from enclosed rate sheet)		\$ _____
Water	\$10.00	\$ _____
Total due with registration		\$ _____

PEPSI & PEPSI PRODUCTS ARE THE OFFICIAL DRINKS OF THE 25th ANNUAL CHILLIFEST & WILL BE SOLD EXCLUSIVELY BY THE GREATER TAYLORVILLE CHAMBER OF COMMERCE.

NO VENDOR WILL BE ALLOWED TO SELL CARBONATED BEVERAGES, BOTTLED WATER, BOTTLED TEA OR CHILLI----YOU MAY SELL ALL OTHER FOOD & DRINK ITEMS (NON-CARBONATED)

It is understood by the undersigned that the Taylorville Chillifest or the Greater Taylorville Chamber of Commerce will **NOT** be held responsible for any loss, theft, or damage.

Vendor's Signature

Date

Please send the completed form with payment to:
Greater Taylorville Chamber of Commerce/Taylorville Chillifest
108 W. Market Street-Second Floor, Taylorville, IL. 62568
or email to lindagtc@consolidated.net.

Visa _____ Mastercard _____ Card # _____
Expiration Date: _____ Security Code(3 Digits)_____

DEADLINE: October 1, 2010

ALL LATE REGISTRATIONS (IF ACCEPTED) WILL BE CHARGED A \$25.00 LATE FEE

Food Vendors must have a Christian County Health Department Food Permit – Cost \$25.00

When your registration is received we will send you the necessary information