

Food Vendor Application

Please reserve ____ exhibit spaces.

I enclose a total of \$ _____

Name _____

Address _____

City _____

State _____ Zip _____

Telephone: _____

Electricity Needed: _____

Size of your concession _____

List food items you will be selling.

Return to:
The Square Affair
Leake County Chamber of Commerce
P. O. Box 209
Carthage, MS 39051

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Chamber of Commerce
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THE SQUARE AFFAIR

Saturday
May 17, 2008

Carthage,
Mississippi



Sponsored by
Leake County Tourism Council
Leake County Chamber of Commerce
City of Carthage

