

2019 Frosty Brew Thru – Vendor Packet

An Indoor Craft Beer/Wine Sampling Event!

Saturday, January 26 - 11:00 AM to 5:00 PM

Fredericksburg Agricultural Fairgrounds
2400 Airport Avenue
Fredericksburg, VA 22401

www.frostybrewthru.com



Jeremy T. Bullock
540-408-3789

jeremytravisbullock@gmail.com

www.frostybrewthru.com

Frosty Brew Thru Wine/Cider Vendor Registration Form

I, _____ (Business) would like to participate in the Frosty Brew Thru on January 26.

I understand that the charge is \$175.00. I further understand that the Frosty Brew Thru provides the 10'x10' space. I am responsible for providing my own tent/coverage, tables and chairs. I must adhere to all the Frosty Brew Thru Rules and Regulations. I must provide a copy of Fredericksburg City Business License and am responsible for submitting a financial statement to the City of Fredericksburg. I must be set up and ready for festival attendees by 10:00 a.m. with service to festival attendees to immediately follow. I further understand that I am responsible for the setup/take down and design of my booth/space, as well as the cleanliness upon departure. Payment must accompany registration form.

By signing below, I agree to provide the Frosty Brew Thru with any necessary artwork for advertising purposes, and that I am authorizing communications for this and future events, from event staff via phone, email and or fax as provided below.

Please remember space will be limited for this event and be based on application and payment submission. **All checks should be made payable to Frosty Brew Thru**

Business Name: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

Cell Phone: _____

E-mail: _____

Please return completed form with payment to: **Frosty Brew Thru**
11801 Berwick Court
Fredericksburg, VA 22408
jeremytravisbullock@gmail.com
www.frostybrewthru.com

Frosty Brew Thru **Food Vendor** Registration Form

I, _____ (Restaurant/Business) would like to participate in the Frosty Brew Thru on January 26.

I understand that the charge is \$175.00. I further understand that the Frosty Brew Thru provides the space and I am responsible for providing my own tent/coverage, plates, napkins, utensils, tables, chairs, etc. I must adhere to all Virginia Health Department regulations, and have proper permits/licenses to sell food in the state of Virginia and the City of Fredericksburg. I must be set up and ready for health inspection by 10:00 a.m. with service to festival attendees to immediately follow. I further understand that I am responsible for the setup/take down and design of my booth/space, as well as the cleanliness upon departure. My menu shall include the following: I. _____ II. _____ III. _____ IV. _____. Payment must accompany registration form.

By signing below, I agree to provide the Frosty Brew Thru with any necessary artwork for advertising purposes, and that I am authorizing communications for this and future events, from event staff via phone, email and or fax as provided below.

Please remember food service space will be limited for this event and be based on application and payment submission. **All checks should be made payable to Frosty Brew Thru.**

Business Name: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

Cell Phone: _____

E-mail: _____

Please return completed form with payment to: **Frosty Brew Thru**
11801 Berwick Court
Fredericksburg, VA 22408
jeremytravisbullock@gmail.com
www.frostybrewthru.com

Frosty Brew Thru Non-Food Vendor Registration Form

I, _____ (Business) would like to participate in the Frosty Brew Thru on January 26.

I understand that the charge is \$95.00. I further understand that the Frosty Brew Thru provides the 10'x10' space. I am responsible for providing my own tent/coverage, tables and chairs. I must adhere to all the Frosty Brew Thru Rules and Regulations. I must provide a copy of Fredericksburg City Business License and am responsible for submitting a financial statement to the City of Fredericksburg. I must be set up and ready for festival attendees by 10:00 a.m. with service to festival attendees to immediately follow. I further understand that I am responsible for the setup/take down and design of my booth/space, as well as the cleanliness upon departure. Payment must accompany registration form.

By signing below, I agree to provide the Frosty Brew Thru with any necessary artwork for advertising purposes, and that I am authorizing communications for this and future events, from event staff via phone, email and or fax as provided below.

Please remember space will be limited for this event and be based on application and payment submission. **All checks should be made payable to Frosty Brew Thru.**

Business Name: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

Cell Phone: _____

E-mail: _____

Please return completed form with payment to: **Frosty Brew Thru**
11801 Berwick Court
Fredericksburg, VA 22408
jeremytravisbullock@gmail.com
www.frostybrewthru.com

Frosty Brew Thru Distillery Vendor Registration Form

I, _____ (Business) would like to participate in the Frosty Brew Thru on January 26.

I understand that the charge is \$475.00. I further understand that the Frosty Brew Thru provides the 10'x10' space. I am responsible for providing my own tent/coverage, tables and chairs. I must adhere to all the Frosty Brew Thru Rules and Regulations. I must provide a copy of Fredericksburg City Business License and am responsible for submitting a financial statement to the City of Fredericksburg. I must be set up and ready for festival attendees by 10:00 a.m. with service to festival attendees to immediately follow. I further understand that I am responsible for the setup/take down and design of my booth/space, as well as the cleanliness upon departure. Payment must accompany registration form.

By signing below, I agree to provide the Frosty Brew Thru with any necessary artwork for advertising purposes, and that I am authorizing communications for this and future events, from event staff via phone, email and or fax as provided below.

Please remember space will be limited for this event and be based on application and payment submission. **All checks should be made payable to Frosty Brew Thru.**

Business Name: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

Cell Phone: _____

E-mail: _____

Please return completed form with payment to: **Frosty Brew Thru**
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