



# 2024 Food Vendor Application

## [www.wallercountyfair.org](http://www.wallercountyfair.org)

### Event Information

Event Name Waller County Fair

Date September 20 – October 6, 2024 Time TBD

Location 21988 FM 359, Hempstead, TX 77445

### Coordinator Information

Name Stephanie Whaley

Phone 832-250-7482

Email [Whaley\\_stephanie@icloud.com](mailto:Whaley_stephanie@icloud.com)

### Vendor Information

**\*YOU MUST SUBMIT A PICTURE OF YOUR TRAILER AND/OR TENT AS PART OF THE APPLICATION PROCESS FOR REVIEW. ALL APPLICATIONS MUST BE TURNED INTO THE EVENT COORDINATOR. See the rules for deadlines. Spaces will be filled on a first-come-first-served basis with priority given to returning vendors in good standing.**

Company Name \_\_\_\_\_

On-Site Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

2 Phone numbers \_\_\_\_\_

Email \_\_\_\_\_

If you participated in WCF last year,  
where was your booth located? \_\_\_\_\_

### Menu

A complete typed list of your food and drink menu, including the price of each item, is required. Menus may not be changed during the event. This menu is part of your application. (Please attach your typed and priced menu with application).

Physical Address:  
21988 FM 359, Hempstead, TX 77445

Mailing Address:  
WCFA P.O. Box 911, Hempstead, TX 77445





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### References

List two (2) fairs, festivals or shows you have participated in within the last year:

Event 1 \_\_\_\_\_

Contact \_\_\_\_\_

Event 2 \_\_\_\_\_

Contact \_\_\_\_\_

### Custom Food & Beverage Trailers/Tents

Please provide the following dimensions including open shutters/awnings and hitch:

Length: \_\_\_\_\_ ft. Width: \_\_\_\_\_ ft. Serve From: Front Back Side

Awning Extension: \_\_\_\_ Yes **OR** \_\_\_\_ No

Do you have sign lighting on-top of the trailer: \_\_\_\_ Yes **OR** \_\_\_\_ No

**Typical RV hook-ups available:** (30 or 50 AMP). If more power is required to service your concession, a fee will be established by Fair Management. Please provide details in writing with your application if electrical needs exceed this available amount.

Do you require power for your concession? \_\_\_\_ Yes **OR** \_\_\_\_ No

Do you require water hook-ups required for your concession: \_\_\_\_ Yes **OR** \_\_\_\_ No

### Certification of Applicant

I have read and understand the 2024 Official Rules and Regulations and any additional information attached. I certify all information contained in this application to be accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Person signing the rental agreement

\_\_\_\_\_  
Title

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