

Printed Name:

Glen Rose Wine & Art Festival

Vendor Application

Friday, June $21^{st} \sim 4-9$ PM Saturday, June $22^{nd} \sim 12-9$ PM Application and Payment MUST be received by May 15^{th}



Business Name:		
Booth Operator Name(s):		
Phone #		
Email:		
Physical Address:		
City:	State:	Zip Code:
Mailing Address:		
City:	State:	Zip Code:
How did you hear about us?	Website:	
Instagram:	Facebook:	
	Percentage	of commercial items: g the festival. Only items listed and approved will
Email applications to forms@glenros Mail application to: Glen Rose Wine PO BOX 1019 Glen Rose, TX Upon approval mail your check or m	e & Art Festival	en Rose Wine & Art Festival to the PO Box listed.
Signature:		Date: