

# ***The Battle of Resaca Reenactment – Resaca, Georgia***

## ***Modern Concession & Vendor Application***

Application deadline is **April 1st**. This is upon invitation only (no walk-ons). Please complete this form indicating that your business and agents will comply with the listed Vendor Regulations. Please ***print*** all information.

Vendor/Business name: \_\_\_\_\_

Type of Vendor sales: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State & Zip: \_\_\_\_\_

Home Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ Bus. Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail address: \_\_\_\_\_

### **General Information:**

Size of Space Needed: \_\_\_\_\_

Number of Electrical Outlets Needed: 110 \_\_\_\_\_ **OR** 220 \_\_\_\_\_

Number of Parking Permits Needed: \_\_\_\_\_

Have you attended before? Yes \_\_\_\_\_ What year? \_\_\_\_\_ No \_\_\_\_\_

Upon invitation pre-approval, make check payable to **Battle of Resaca, Inc.** and enclose in full with this form. Pre-registration shall not be accepted without this form and donation. Vendors will be notified of their invitation approval by the week of **April 15th**. Application donation fee deadline is **April 1st**. After receiving your donation fee, a tax exempt letter for your donation will be mailed to you prior to the event.

I have read and agree to all of the Vendor Regulations.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### ***Please mail form with fee to:***

Battle of Resaca, Inc.  
P.O. Box 0919  
Resaca, GA 30735

E-mail: [k.padgett@bellsouth.net](mailto:k.padgett@bellsouth.net)