

## **Cleveland Eats**

## Participating Marketplace Vendor Commitment Form

Saturday, September 16th, 2017

Mall B

## YES! I would like to participate in Cleveland Eats!

Business Name:	
	v you would like to appear in print)
Business Type/Style:	
Street Address:	
City:	State: Zip Code:
Business Phone Number:	
Day-to-Day Contact Name:	
E-mail Address:	PhoneNumber:
Business Website:	
Pleaselist the signature item (s) yo	uplan tooffer for sale:

Please return this form to clevelandeats@tri-c.edu no later than Tuesday, June 20th.

I have read the Overview and Partnership Summary for Cleveland Eats and I agree to the terms and responsibilities.

-Based on the number of applicants and available space, the Culinary Council will review and accept Marketplace Vendors based on who best represents Cleveland, Cleveland food and culinary goods!

- All Cleveland Eats Marketplace Vendors will be notified of acceptance by 6/30/17.

- Once you are selected as a Marketplace Vendor we will be sending you updates

with logistical and payment information.