



April 6 and 7, 2024

Festival hours Saturday 10:00 – 5:00 and Sunday 10:00 – 4:00

Food Vendor Guidelines

1. Applications are due by Feb 26. Applications may be e-mailed to Info@ArtinthePass.com, mailed to Art in the Pass, PO Box 403, Pass Christian, MS 39571 or dropped off at City Hall. All applicates will be notified of their acceptance or non-acceptance by Feb 29.
2. If accepted, the \$150 booth fee must be paid or postmarked by March 8, via Venmo to Pass Christian Main Street Foundation, or cash or check (payable to Art in the Pass) mailed to Art in the Pass, PO Box 403, Pass Christian, MS 39571 or dropped off at City Hall.
3. Food Vendors will be located along the southeast side of Memorial Park near the corner of Fleitas Ave and Scenic Ave.
4. Vendors must provide any and all necessary booth materials and equipment, including but not limited to a tent, table, chairs, etc. Electrical outlets and water faucets are available. Please bring your own electrical extension cords and/or water hoses.
5. Vendors will be assigned a 10' x 10' space with 2 feet of separation on each side. Tents are required to stay within the setback areas in front and back. Vendors are required to be in operation Saturday, 10:00 to 5:00 and Sunday, 10:00 to 4:00.
6. Booth Set-up: Friday, April 5, noon to 6:00; Booth Break-down: Sunday, April 6, after 4:00 . Set-up and break-down are the vendor's responsibility.
7. Vendors may only sell food products listed on the application acceptance form. Water, soft drinks, wine and beer will only be sold by the Art in the Pass as their fundraiser.
8. Each vendor must have a state food inspection permit. Contact Victoria at the Health Dept 228-383-8829 with questions.
9. All vendors will be responsible for sales tax, per Mississippi State Tax Commission rules. You will be provided with a tax form at the beginning of the Festival. Tax must be paid before leaving the Park.

Food Vendor Application

Business Name _____

Contact Name _____ Contact # () _____

Address _____ Email _____

Proposed foods to be sold _____

I have read and accept the guidelines shown above

_____ Date: _____

Signature