



VENDOR REGISTRATION FORM

33rd Annual Taste of North Texas
Thursday, March 28, 2024
6:00 – 8:00 PM, **Golden Triangle Mall**

Please return your registration ASAP!!

Restaurant:	
Contact Person:	Title:
Address:	
City, Zip:	Email:
Work Phone:	Cell Phone:

Indicate the type of food you will be serving (You may serve more than one type of food):

Appetizer: _____ Entrée: _____ Dessert: _____ Beverage: _____

Be prepared to serve approximately 1200 samples!

Each vendor will have a 10x10 space. Please indicate if more space is needed. Please provide your own table if possible (Limited tables are available, 1 maximum. First come first serve):

NO electricity: _____ Table request: Yes _____ No _____
With electricity: _____

Indicate the number of employees working at your booth: _____

(Please note: If you have more than 8 employees working at your booth, you will be required to purchase tickets for the additional people).

All vendors are required to have personnel at their booth for the duration of the event. Please be ready to serve Judges by 5:30 pm and attendees at 6:00 pm. Teardown will begin at 8:00 pm.

Reservations only honored with authorized signature.

Authorized Signature

For more information, contact: Julie Willis – 940.390.7699 or Jan Nichols – 940.312.2154
Email: tasteofnt@gmail.com / www.tasteofnorthtexas.org