

**Reston Multicultural Festival**  
**Food Vendor Application**

**Date of Festival:**

Saturday, September 22, 2001

**Hours of Operation:**

10:00am to 6:00pm

**Return Application To:**

Reston Multicultural Festival  
c/o Alvarez LeCesne  
2310 Colts Neck Rd.  
Reston, VA 20191  
703-476-4500 x 209

**Application Deadline:**

Monday, June 29, 2001

**Amount Due with Application:      \$100.00**

**Payment and Certificate of Insurance must be included with Application (see guidelines)**

**Merchant Company Name:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Name of Country/Culture:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax :** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**VA Sales Tax ID #:** \_\_\_\_\_

**Amount enclosed:**     \$100.00          **Check Number:** \_\_\_\_\_ **paid to the Reston**  
**Community Center, or Visa Card Number:** \_\_\_\_\_ **or Master Card number:**  
\_\_\_\_\_.

**I have read, fully understand and agree to abide by the Guidelines.**

**Signature of Authorized Merchant**  
**Representative:** \_\_\_\_\_

**Printed name of above:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Menu Selection:**

<b><u>Item</u></b>	<b><u>Price</u></b>
<b>1.</b> _____	_____
<b>2.</b> _____	_____
<b>3.</b> _____	_____
<b>4.</b> _____	_____
<b>5.</b> _____	_____