



**Cape Cod Canal Day  
Food Vendor Application  
Saturday, Sept. 21, 2024  
Rain Date Sun. Sept. 22, 2024  
70 Main St., Bourne, MA 02532  
(508) 759-6000**

**Business Name:** \_\_\_\_\_

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

**Email:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Description of Items to Be Sold (Please be specific).**

**Note: Cape Cod Canal Day Committee has final approval over all items listed and approved what may be sold!  
Truck Locations: assignments will be at the discretion of the Chamber.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Application due  
By April 1, 2024  
Fee: \$400.00 due April 1st**

You are responsible for obtaining all necessary permits from the Bourne Health Department and Fire Department. Please contact the department directly.

Health: (508) 759-0600x1513  
Fire: (508) 759-4412

**Please indicate Truck size here:**

***For Office Use Only***

Date Rec'd: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Amt. Rec'd: \_\_\_\_\_  
Paid in Full:    Y    or    N  
Balance Due: \_\_\_\_\_  
◇ Spread Sheet  
◇ Web page/FB Following  
◇ Truck Size  
◇ Invoice No. \_\_\_\_\_

**Return application to [moliva@capecodcanalchamber.org](mailto:moliva@capecodcanalchamber.org)**

**CC#** \_\_\_\_\_

**Expiration** \_\_\_\_\_ **Date** \_\_\_\_\_

**Amount \$** \_\_\_\_\_

**Name on CC#** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**All Food Trucks must be self-sustaining. No Electricity or water is to be provided.  
Checks payable to: Cape Cod Canal Region Chamber of Commerce**