

# Culinary Tour Local Vendor Consent Form

## Vendor Information

Vendor Name

Contact Person

Phone

Email

Business Address

## Participation Details

Event Date(s)

Products / Samples to be Offered

## Consent

☐

I consent to the use of our name, logo, and images for marketing purposes related to the event.

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I confirm compliance with all local health and safety regulations.

Additional Comments or Notes

Vendor Signature

Date