

ROARING RANGER DAY

REGISTRATION APPLICATION

EARLY PAYMENT & REGISTRATION ALLOWS YOU TO

PRE-SELECT LOCATION (\$)

Name: _____ **Phone:** _____

Organization/Group: _____ **Tax ID (if Applicable)** _____

Address: _____

Email Address: _____

Concession/Vendor will provide:

(Any Changes to Menu must be approved prior to event or you will be held to your menu)

Food/Beverage Type: _____

Games: _____ **Craft Type:** _____

Other: _____

Booth Space Requested: 1st Choice _____ **2nd Choice** _____

Will you be operating out of a trailer? _____ **What Size?** _____

Canopy/Tent? _____ **What Size?** _____

Will you be operating a Smoker or Grill? _____

I need _____ **10'x10' booth space (s) @ \$20 Each** **Total \$** _____

I need Electricity (\$10 EXTRA PER BOOTH) MUST PROVIDE EXTENSION CORDS) Total \$ _____

TOTAL ENCLOSED \$ _____

REGISTRATION APPLICATION (RETURN TO ADDRESS BELOW WITH PAYMENT)

Make Check Payable to :

Ranger Citizens Task Force

P.O. Box 542

Ranger, Texas 76470