



# Taste of Trussville

## Vendor Application

**Deadline to submit application is Friday, April 18 by Noon**

Thursday, May 1, 2025, 5:30-8:00 pm

Trussville Civic Center



**TRUSSVILLE**  
AREA CHAMBER OF COMMERCE

Name of Restaurant/Bakery: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner: \_\_\_\_\_ Person in Charge at event: \_\_\_\_\_

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

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

Daytime phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

What food(s) will you serve? (**Small portions** of 1-2 of your signature dishes is suggested):

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

Do you have a current health department permit?                      YES                      NO

If yes, please give name, number and where issued: \_\_\_\_\_

Will you need electricity on site?                       YES                       NO

**A \$50 refundable deposit is required to hold your space.**

Make check payable to The Trussville Area Chamber of Commerce (TACC) and mail with application to:  
Trussville Area Chamber of Commerce, 400 Main Street, Trussville, AL 35173

For questions, please call the chamber at 205-655-7535 or email  
[Melissa.Walker@trussvillechamber.com](mailto:Melissa.Walker@trussvillechamber.com).