



FOOD TRUCK REGISTRATION FORM

Saturday May 2, 2026

9:00am - 1:00pm

250 Jaguar Trail, Ridgeland, SC

PARTICIPANT INFO (Please print clearly):

NAME: _____

BUSINESS NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

MAIN PRODUCT /ITEMS TO BE SERVED: _____

Food Truck Space Agreement:

Food Truck Fee: Donation to Caring Hearts of South Carolina

Size needed for your food truck / trailer: _____

- No stakes can be used to secure your tent in the pavement or grassy areas.
- Set-Up time Saturday May 3rd – 7:00 – 8:30 AM. Show begins at 9:00 AM – **Will need to be checked in and set up NO LATER than 8:30**
- No electricity will be provided
- You are responsible for cleaning up your area before leaving
- Follow all local, state and federal laws.
- Must provide Certificate of Insurance with this agreement

WAIVER/RELEASE OF ORGANIZERS & SPONSORS

I have read and acknowledged the rules above. In submitting this form for myself or for the participant named (if vendor is under 18 years), I acknowledge and agree to the above, and hold harmless, all sponsors and organizers and any other party connected with these events in any way whatsoever, singularly or collectively, from and against any blame or liability from any injury, misadventure, harm, loss, inconvenience, or damage suffered or sustained as a result of participation. I agree to be responsible for my conduct and abide by any official decisions made.

FOLLOWING IS REQUIRED WITH APPLICATION

- Current Local Health Department Permit
- Copy of Certificate of Insurance

Signature: _____ Date: _____