

Event Coordinator Registration

Cape Girardeau County Public Health Center
 Environmental Health
 Cape Girardeau, MO 63703
 www.capecountyhealth.com
 Phone (573) 335 7846



Event Information

Event Name	
Event Location	
Event Date(s)	
Event Hours:	
Number of Food Booths:	

Event Coordinator Information

Full Name	
Email Address	
Phone Number(s)	
Address	

Additional Information

Will equipment / utensils be provided for booth operators?	Yes (Please specify): _____ No
Describe restroom facilities:	
Describe restroom handwashing facilities:	
Describe water supply:	
Will electricity be provided?	Yes [Public Utility] [Private Generator] [Other] _____ No
Describe wastewater disposal:	
Describe garbage disposal and frequency of pick-up:	
Will booths be on nonabsorbent surface?	Yes No (Please Specify) _____

Please email this form AND the vendor list to: environmental@capecountyhealth.com

Print Name _____

Signature _____

Date: _____

Temporary Event: Food Vendor List

First and Last Name of Food Vendor	Business Name	Mobile unit or Temporary Set-up?	Phone Numer	Email Address	Type of food

EVENT NAME:
ADDRESS
DAY OF EVENT COORINATOR(S)
SET-UP TIME:

