



Temporary Event Form

Date _____

1. Name of organization _____

2. Address _____

3. Person in charge _____ Phone _____

4. Name of event _____

5. Date(s) of event _____

6. Location of event _____

7. Menu for event

8. Source of food for event

9. Contact the City of Joplin Finance Department at (417) 624-0820, ext 242, for City business license requirements.

Follow “Temporary Events Requirements” as included with this form.

Complete one form for each event and return to the Joplin Health Department in person, by mail, fax, or email at least one week prior to the event.

By signing below, I agree to meet all the requirements set forth for food vending by the City of Joplin for temporary food establishments:

Signature of Person in Charge

Date