

2016 Commercial Vendor Application

July 15, 16 & 17 Friday/Saturday 10am to 10pm Sunday 12pm to 5pm



First Name			Last Name		
Business Name_					
Address				_City	
State	Zip	Website			
Phone	none Cell Phone		F	Email	
On Site Contact			Cell Phone		
			License Plate Number		
	ace is limited	·		nem your name and number? Yes	
Commercial Ex	hibitor Fee	Booth Fee Postmar	ked by April 1st	Booth Fee Postmarked After April 1st	
Single Space (10' X 10') Chamber Member Rate		\$850 \$850-Chamber dues		\$900 \$900-Chamber dues	
10'X10' spaces @\$850 each or after April 1st @\$900 each Chamber members subtract the amount of your dues				\$	
Additional 20 amp circuits @			ch	\$	
Final Total				\$	
Unschedule	d additions to al 20-amp circ	electric service provid	-	ional 20 amp circuits \$50/each. ival hours will be assessed at \$200	
Check	Visa	MasterCard _	American Exp	oress Discover	
			·	CVV (3 digit code)	
	Signature Name as it appears on the card				

Billing Address:	Zip Code:
Application MUST BE POSTMARKED by April 1, 2	2016
Please include <u>ALL</u> of the following items: <u>signed approof of insurance</u> . All fees must accompany this app	
Make checks payable to: Greater Farmington Arc	ea Chamber of Commerce
Mail to: Greater Farmington Founders Festival 33 48335 or email with credit card information to Festival 248-919-6917.	
Special Requests (not guaranteed)	
Type of Activity Be specific with regard to the type of activity planned activity that is not specifically detailed in this application their booth area. Please state below the exact activity	on. Exhibitors must also stay within the confines of
Authorized Signature	Date