

# Carroll County Chamber of Commerce Vendor Application

I hereby apply as a vendor for the Spring Fling Event, April 23, 2020; 11:00 AM - 1:00 PM.

|                  |        |      |  |  |
|------------------|--------|------|--|--|
| Name:            |        |      |  |  |
| Business:        |        |      |  |  |
| Mailing Address: |        |      |  |  |
| City:            | State: | Zip: |  |  |
| Phone:           | Cell:  |      |  |  |
| Contact Person:  |        |      |  |  |
| Contact Email:   |        |      |  |  |

### Additional Information:

Vendors will be required to donate at least 1 door prize for the event.

All Vendors will receive two meal tickets upon booth rental.

Vendors will be provided with one 8 foot table.

All vendors are responsible for leaving a clean area once the event has ended.

Vendors shall exhibit professional manners always.

Booth Cost:                                 \$20 Chamber Member  
  \$30 Non Chamber Member

**Please complete this form and return to The Carroll County License Bureau/Carroll County Chamber of Commerce office, along with your payment.**

|            |  |
|------------|--|
| Signature: |  |
| Date:      |  |

### Office Use Only

|           |       |
|-----------|-------|
| Date Paid | _____ |
| Cash      | _____ |
| Check     | _____ |
| Check #   | _____ |