

Marketplace on the Plains Vendor Application

www.logancountychamber.com

email: info@logancountychamber.com

Signature Required _____ Printed name _____

Business Name: _____

Address: _____ City, State, Zip: _____

Cell Phone: _____ Land Line: _____

***Email Address: _____

BUSINESS TRADE NAME if applicable: _____

TYPE OF MERCHANDISE: _____

CHAMBER MEMBER RATES

_____ Free for 6 months from DATE _____ \$ _____

Specify what season you will be participating _____

TOTAL PAYMENT ENCLOSED \$ _____

NON-MEMBER RATES

_____ \$50 for each Holiday Event \$ _____

Specify what season you will be participating _____

TOTAL PAYMENT ENCLOSED \$ _____

Signature Required: _____ Date _____

Please Print Clearly: _____

Drop off or mail your completed form with cash or check made out to: Logan County Chamber, 109 N Front Street, Sterling CO 80751 Call (970) 522-5070 for any questions or to pay by credit card

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FOR OFFICE USE ONLY

Date application Received: _____

Cash _____ Ck _____ CC _____ TOTAL AMOUNT PAID: \$ _____