

CHAMBER OF COMMERCE

Making Magical Memories

COLON 4TH OF JULY CELEBRATION 2024 VENDORS FORM

Crafters & Other Non-Food Vendors

- One 10x10 space: \$35**
- Two 10x10 spaces: \$55**
- Three 10 x 10 spaces: \$75**

Chamber Members will get \$10 off per space

NO CHARGE FOR NON-PROFIT ORGANIZATIONS

- > Midway will be on N Blackstone Ave from 9am to 4pm
- > Vendor set up starts at 7am day of event
- > Vendors should be completely set up by 9am and should not start to pack up or close before 4pm. Those who pack up or leave early will not be invited back

Questions??

Contact Lisa Gilman: LGilman@Sturgis.bank

Food Vendors, Walking Vendors, Vendors Charging Admission or Pay to Play

\$250 per space

All Food Vendors will be set up closest to State Street

NO FREE OR COMMUNITY FOOD OR DRINK VENDING IN THE PAID FOOD VENDING AREA

- > Must have permit/license from the Health Dept (we will ask to see this BEFORE you set up)
- > Must indicate (1)What you will be selling, (2)Your power needs (3)Size of food truck
- > Must stay until 4 pm. Vendors welcome to stay open for 6pm concert on Blackstone Ave

Questions??

Contact Keith Stickley: KeithStickley@gmail.com

COMPLETED FORM & PAYMENT MUST BE RECEIVED NO LATER THAN JUNE 15TH

PLEASE MAKE CHECKS PAYABLE TO: Colon Chamber of Commerce - PO Box 482 - Colon, MI 49040

Spaces will not be reserved without payment.

Vendor fees are **Non-Refundable** unless the event is cancelled.

Vendors will be responsible for their own individual display, set-up, protection of personal property & clean up. Colon Chamber of Commerce or Village of Colon will not be responsible or liable in any way for loss, theft, damage, or defacement of property.

----- KEEP TOP HALF – SEND BOTTOM HALF WITH PAYMENT -----

NAME _____ # OF SPACES _____ AMOUNT ENCLOSED \$ _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____ PHONE: _____

DESCRIBE WHAT YOU ARE SELLING: _____

FOOD VENDORS: WHAT SIZE FOOD TRUCK OR WAGON? _____ POWER NEEDS? _____

I have read and agree to all terms and conditions

SIGNATURE: _____ DATE: _____