2024 1st Annual Summer Bash

June 8, 2024 10:00am-4pm Vendor Application

type of accidents

APPLICATION DUE DATE: May 31, 2024

Cross Plains Chamber of Commerce & Visitors Information Center P.O. Box 233 140 S. Main St. Cross Plains, TX. 76443 Crossplainschamber@yahoo.com

| APPLICANT INFOR | IVIATION | | | C | ontact | | Contact | | |
|--------------------------------------|------------|----------------------------|-------------|-------------------|--------------------------|----------------|------------------------|-------------|-------------------|
| Business Name | | | | F | irst lame | | Last Name | | |
| Street Address | | | | | | | Apartm | ent/Unit # | |
| ity | | | State | | | ZIP | | | |
| Phone | | | | E-mail Address | | | | | |
| Cell Phone | | | Fax: | | Other Contact Info | | SSN or SalesTax No. | | |
| | | | | | | | | | |
| Do you have a website? | | | YES | NO | Website | Address: | | | |
| Do you have a Facebook page | | k page? | YES | NO | Page Name: | | | | |
| Do you have a Twitter or Acct? | | or Instagram | YES | NO | Acct. Names: | | | | |
| OOD MENU/ITEN | /IS | | | | | | | | |
| Items to be sold or displayed | | No exclusives obscenities. | s on nove | elty or gift | items of a | ny kind. No it | ems may | bear profai | nity, vulgarities |
| | | | | | | | | | |
| TERMS AND SIGNA | ATURE | | | | | | | | |
| 10 x 10 is \$50.0 Discounts for C | 00, 20 x 2 | | | | | | | - | lay 31, 2024. |
| I will furnish CF | PCOC wit | h a certificate | of liabilit | y insuranc | e | | | YES | NO |
| | Signature: | | | | | | | | |