

## Augusta Christmas Rendezvous **Vendor Application**



Date of Application:	Contact Person:
Business Name:	
Contact Phone Number: ————	City:
Address:	State: Zip:
E-Mail Address:	
Description of merchandise or services you will be offering for sale:	
Do you need electricity: Yes	No
Do NOT send payment at this time. You will be contacted upon acceptance with payment details.	
One Table \$30	Two Tables \$60
Please mail Vendor Application to	
Augusta Chamber	



or email it to chamber@augustamontana.com







P.O. Box 471, Augusta, MT 59410