

Oktoberfest



Name: _____

Address: _____

Phone: _____

Email: _____

Vendor Business Name: _____

Website/Facebook: _____

Detailed description of your product: _____

Registration:

Mail your check to P.O Box 539 Hammondsport, NY 14840.

The spaces will be approximately 10”X10”. All vendor spots will be assigned by the Chamber Office.

DEADLINE FOR REGISTRATION IS September 29, 2024.

Questions? 607-569-2989 or

Email: Info@hammondsport.org

Oktoberfest Vendor Application

Oct. 6th 1:00-5:00 pm at the Hammondsport Fireman’s Pavilion

Submit your application as early as possible!

