

2019 Handmade Food Application

This form is for all vendors who sell products or services that are handmade by the person vending the products.

Please return completed form by emailing Shirley Schultz, sschultz@owatonna.org or Emily Volkmer, evolkmer@owatonna.org. You may also mail the form to or mail to: Shirley Schultz, Owatonna Area Chamber of Commerce & Tourism, 320 Hoffman Dr., Owatonna, MN 55060.

Your Business and Co				
			Company Name:	
Mailing Address:		City:	State:	Zip:
			none #:	
Which of the Downto	own Thursday Event Da	ays are you available to □ July 11 th	o attend? (Please check a □ August 1 st	ıll that apply):
		- July 11	_ / lugust 1	
What category of pro	•			
□ Baked Goods	□ Canned Items	□ Prepared Food	☐ Candy Confection	าร
☐ Other (please speci	fy):			
Does your booth req	uire electricity? If yes,	describe the amount of	of electricity you will nee	d:
What is your booths	size? □ 10′ X 10′ ⁻	Tent Area □10′ X 20′	Tent Area □ Truck or	Trailer Area
Any other Information	on that we should know	w about your business:	:	