



MAIN STREET



HISTORIC DOWNTOWN  
OWATONNA

# 2023 Sponsor Application.

Let's meet in Downtown.

Please return completed form and payment before **April 30<sup>th</sup>, 2023**. We accept cash, check or credit card. Email to

Lisa Cochran at lcochran@owatonna.org, or mail to:

Lisa Cochran-Owatonna Area Chamber of Commerce & Tourism, 320 Hoffman Dr., Owatonna, MN 55060.

### Your Business and Contact Information:

Name (First and Last): \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Primary Phone #: \_\_\_\_\_

Who will be attending the event to represent your business? \_\_\_\_\_

What level of sponsorship are you applying for? (Please circle)

**Headline Sponsor \$8,000**

**Market Sponsor \$3,000**

**Bands & Music Fans \$1000**

**Partnership \$500**

Which of the Downtown Thursday Event Days are you available to attend? (Please circle all that apply):

**June 1**

**July 6**

**August 3**

**September 7**

What is your category of business? Do you want to vend products at Downtown Thursday?

Please provide a list of products you would like to vend at Downtown Thursday:

Does your booth require electricity? If yes, describe the type/amount of electricity you will need:

What is your booth size? (Please circle)    10' X 10' Tent    10' X 20' Tent    Truck or Trailer Area (size) \_\_\_\_\_

Any other information we should know about your business?

A confirmation email will be sent once paperwork and payment have been received at the Chamber Office. Included in the email will be our Vendor Guide which has additional details regarding Downtown Thursdays. **The Friday before each event**, you will receive a map that lists locations of all the businesses, food vendors, street vendors, and entertainment. It will also include any last-minute updates.

In consideration of payment, MainStreet Owatonna agrees to provide all items listed under the corresponding sponsorship circled above and as described on the accompanying sheet of paper. My signature below reflects my understanding of this agreement.

Signature

Date

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVC: \_\_\_\_\_