

Downtown Thursday 2024 Home-Based Business Vendor Application

This form is for all vendors who sell products from a home-based business, that are not handmade, by the person owning the business.

Please return completed form by emailing Lisa Cochran at lcochran@owatonna.org or mail the form to: Lisa Cochran, Owatonna Area Chamber of Commerce & Tourism, 120 S Oak Ave., Owatonna, MN 55060.

Your Business and Contact Informati	on:		
Name (First and Last):	Business Name:		
Mailing Address:	City	y: State	e: Zip:
Email Address:	Ce	ell phone #:	(for use on Downtown Thursdays)
Which of the 2024 Downtown Thurse	day Events are you	attending?	
June 6	July 11	August 1	September 5
What category/categories of your ho	me-based busines	ss products do you wa	ant to vend at Downtown Thursday?
Clothing/Footwear Books Jewelry N	lusic Gifts Furnitu	ure Home Goods Oth	her (please specify):
Does your booth require electricity?	If yes, <mark>describe the</mark>	e amount/type of ele	ctricity you will need:
What is your booth size?10′ X 1	0' Tent10' X	20' TentT	ruck or Trailer (size)
Any other information about your bu	usiness we should	know:	
date attended. If you sign up for all 4 refunds under any circumstances. 1) Your complete application as 2) You have received a confirmation email, each but	I dates at the same on are not register and payment (cash, ation email from L siness will receive archer each	e time, you receive a c red as a vendor until: check, or credit card) isa Cochran, Main Str the Vendor Guideboo e event, participants w	are received at the Chamber Office reet Director ok which has additional details regarding will receive a map listing the locations of all
Thursday event(s) chosen above. Loca	ation to be assigned who, in the sole jud	d upon contract appro gement of Main Stree	de a space for vending at the Downtown oval. Main Street Owatonna reserves the et Owatonna, does not meet the standards s my understanding of this."
Signature		Date	
Name on card:		Credit Card #	#:

Expiration Date: _____