



Elk Rapids Area Chamber of Commerce
305 US 31 North
P.O. Box 854
Elk Rapids, MI 49629
Phone: 231-264-8202
Email: info@elkrapidschamber.org
Website: www.elkrapidschamber.org

2021 **Food Vendor Application for Evening on River Street**

Organization Name: _____

Contact Person: _____

Address: _____

Phone: _____

Email Address: _____

Type of Food: _____

The dates you are requesting to appear at Evening on River Street (please check):

6/30 ____ 7/7 ____ 7/14 ____ 7/21 ____ 7/28 ____ 8/4 ____ 8/11 ____

Fee: \$60 per week **OR** \$350 for a 7-week commitment
\$125 extra for a Patron Sponsorship

Amount Enclosed: \$_____

You are responsible for obtaining and maintaining the appropriate state licensing for your food operation. A trash receptacle will be provided for you. You are responsible to pick up all trash and clean up your area (tie up trash) before you leave at 9:00 p.m.

Please note:

- The committee chairperson will determine exact set location for vending.
- This application **MUST** be approved before you may participate.
- This application must be accompanied with vendor fee check.
- No refunds due to inclement weather.
- Allow at least 5 business days for consideration.
- Return application to the Chamber office at the address listed above.
- Only Elk Rapids Chamber members are eligible to participate.

The Elk Rapids Area Chamber of Commerce has the right to accept or deny any application for any reason.

Vendor signature: _____ Date: _____