



VENDOR FORM

August 14, 2025 | Main Street, Bowman, North Dakota

Due: July 21, 2025

Contact Person _____

Company Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____ Email Address _____

Product Description (Be Brand Specific) _____

Bowman Area Chamber of Commerce members will be given preference for space. Please provide a general idea of what you will be selling to help with placement. The exhibitor assumes the entire responsibility and liability for losses, damages, and claims.

BOOTH SPACE INFORMATION

Please select the option that best describes your needs:

- Chamber Member Booth Space | FREE
- Non-Chamber Member Booth Space | \$50
- Non-Chamber Member Food Trucks | \$250 (does not include things like donuts, cotton candy, etc.)

My booth is approximately _____ feet x _____ feet.

Do you need electricity? (*Limited availability*)

- Yes
- No
- I plan on running a generator

PAYMENT*

- I'm a 2025 member – no need to pay
- Enclosed is a check payable to Bowman Area Chamber of Commerce
- Please invoice me

*In the case of an act of God event no refunds will be given

Please Return Forms To:

13 E Divide, PO Box 1143, Bowman, ND 58623

megan@swnd.org

701.523.5880

