



## Blythewood Section - Vendor Application

**Location: 311 Blythewood Rd., Blythewood, SC 29016**

Applicant Information		
Name:		
Address:		Cell Phone:
City:	State:	ZIP Code:
Email:		
Co-applicant Information		
Name:		Phone:
Address:		
City:	State:	ZIP Code:
Email:		
Vendor Space Information: 311 Blythewood Rd.		
Desired number of 10' x 10' indoor spaces:	X \$75 each = \$	
Desired number of 15' x 30' outdoor spaces:	X \$75 each = \$	
<b>Total Due =</b>		<b>\$</b>
<i>You will be contacted via email or phone by 5:00pm, Sept. 7, 2016 with your space number.</i>		
<b>I/we agree to set-up no earlier than 5:30am, Sept. 9, 2016 and clean up and vacate my/our space(s) by 8:00pm, Sept. 10th, 2016.</b>		
Signature of applicant:		Date:
Signature of co-applicant:		Date:

Mail this form with payment to:



# BLYTHEWOOD

Greater Blythewood Chamber of Commerce

PO Box 1055, Blythewood, SC 29016

(803) 712-3806

[info@blythewoodchamber.com](mailto:info@blythewoodchamber.com)

[www.BlythewoodChamber.com](http://www.BlythewoodChamber.com)