



## 2025 Winter Market Vendor Registration

Name: \_\_\_\_\_ Name of Business \_\_\_\_\_  
Name of Person(s) or Group Renting Space

Address: \_\_\_\_\_  
City State zip

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Products/Information at your booth? \_\_\_\_\_

### Limited to two tables/vendor

☐ Friday, December 5<sup>th</sup> – 4:00 pm No Charge for a booth (The Level – Masonic Hall, be ready to sell by 5:00 pm.

# Spaces \_\_\_\_\_ # of tables \_\_\_\_\_

Spaces are rented on a first come first serve basis, form and fees received.

### Mail this form and remittance to:

Sweet Grass County Chamber of Commerce  
PO Box 1012, Big Timber, MT 59011

Questions? Please call Christine Bakke @ (509) 387-1310 or email at Christine@BigTimber.com

### All vendors please read and sign the following:

In acceptance of this entry form and for being permitted to voluntarily participate in this event, I hereby assume full and complete responsibility for any injury or accident which may occur during my participation in this event and I hereby release and hold harmless the sponsors and the organizers of the Sweet Grass County Chamber of Commerce and their agents and employees and all other persons or entities associated with this event from any loss, liability, damage or claims I may have arising out of my participation in this event.

\_\_\_\_\_  
Signature of Voluntary Participation

\_\_\_\_\_  
Date