Vendor Application Form - Midsummer at Memorial

Event Date: Wednesday, July 16, 2025 | Event Time: 5:00-8:30 PM

Location: Memorial Park, La Grange Park

Business / Organization Name:	
Contact Person:	
Contact Person:	
Phone Number:	
Email Address:	
Mailing Address:	
Type of Booth (describe product, activity, or game):	
Do you need special accommodations (non-electric)?	
No	
Yes (please describe):	

Agreement:

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By submitting this form, I	agree to arrive on time, stay for the full event, and provide an engaging
activity, giveaway, or gam	e at my booth. I understand no electricity is provided and the event is rain
or shine.	
Signature:	
Date:	