



## VENDOR APPLICATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Type of Vendor/Food Service: \_\_\_\_\_

Experience: \_\_\_\_\_  
\_\_\_\_\_

Where You Have Operated: \_\_\_\_\_  
\_\_\_\_\_

Type of Equipment/Product: \_\_\_\_\_  
\_\_\_\_\_

Serving Capabilities: \_\_\_\_\_  
\_\_\_\_\_

Staffing: \_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Return Application with Photos of Equipment to:**

Glencoe CampResort  
PO Box 999  
Sturgis, SD 57785  
**campinfo@glencoecamp.com**  
605-347-4712  
Fax: 605-347-8888