



May 30, 2026

VENDOR APPLICATION

Business Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Authorized Contact _____

ABOUT YOUR BUSINESS OR ORGANIZATION

Please explain what your business or organization does or promotes in order for us to place you accordingly and also to help us prevent duplicate vendors. (Include items that will be sold or given away)

VENDOR SPECIFICATIONS

Type (Check One)

☐ Indoor (See Size)

☐ Outdoor (See Size)

☐ Food - \$225.00

Size (Check One)

☐ 10x10 - \$50

☐ 10x20 - \$100

☐ 10x30 - \$150

Power (Food Vendors Only)

☐ 110

☐ 220-30A

☐ 220-50A

*Aside from food vendors,
power will only be provided
where available*

FOOD VENDORS TO BE LIMITED.

Authorized Signature _____ Date _____

PLEASE NOTE

Vendor Fees must be paid at time of application. No refunds.

☐ Cash ☐ Check ☐ Venmo (please put your name in payment description)

All vendors MUST set up between 12PM - 5PM Friday, May 29, 2026.

DUE BY: MAY 20, 2026

Make checks payable to: Benefit for the Basin

Mail to: 6510 South Sixth Street, #130 • Klamath Falls, OR 97603

For more information contact:

Cristy Rodriguez 541-810-8201 • Email: bftbvendors@gmail.com (attn: Cristy)

OFFICE USE ONLY Received ____/____/____ By _____