

TOWN OF OGDEN DUNES COMMUNITY CENTER

VENDOR FEE FORM

Event Name _____

Date(s) of Event _____

Gross Revenue \$ _____

20% Fee \$ _____

Fee due 7 days after commencement of event or due monthly for ongoing events

Make Checks Payable to:

Town of Ogden Dunes
115 Hillcrest Rd
Ogden Dunes, In 46368

Signature of Vendor

Name of Business

Ogden Dunes Group Responsible Person

Date