

Phone: (406) 266-1276
 Address: 415 Whitehall St.,
 Whitehall, MT 59759



Website:
www.westernlegacycenter.com
 Operation Hours:
 7 days a week : 10 am- 5 pm

General Space Rental

Date/s of Event: _____

Event Type: _____

Name of Event: _____

Responsibilities and Liability:

- Exhibitors are responsible for providing any services, furnishings, or other items beyond the booth space provided
- The Whitehall Chamber of Commerce, Town of Whitehall, Western Legacy Center, and their employees or volunteers are not responsible for the safety of exhibits, exhibitors, or their property against theft, burglary, vandalism, or damage caused by fire, water, or other incidents
- By signing this agreement, exhibitors waive any claims for damages resulting from participation in the event
- It is strongly recommended that exhibitors carry liability insurance for their protection
- Exhibitors must comply with all rules, regulations, and conditions set forth by the Town of Whitehall, Western Legacy Center, Jefferson County Health Department, and the State of Montana to ensure the safety and welfare of all visitors.

Space Reservation and Refunds:

- Space is not reserved until full payment is received
- Refunds will not be issued for requests made less than 30 days before the event

Food Vendors:

- Food vendors must provide a copy of their Mobile Food Purveyor license with this application to the Western Legacy Center to sell food at the event

For questions regarding the Food Purveyor License, please contact the County Sanitarian at (406) 225-4126

Submission Instructions:

- All applications must be emailed, mailed, or dropped off directly to Western Legacy Center management
 - In person at the Western Legacy Center: 415 Whitehall, Whitehall, MT 59759
 - Mail: P.O. Box 1045, Whitehall, MT 59759
 - Email: khepplermtwlc@gmail.com

Vendor Name/Organization	
Phone #	
Email Address	
Mailing Address	
Desired Space \$25 a Day	Conference Room: <input type="checkbox"/> Parking Lot: <input type="checkbox"/> Other (please describe - pricing will vary): <input type="checkbox"/>

Signature :

Date:

Associate Receiving

Paid in Full
