

North Warren Chamber Website Event Form

Please fill out this form and send back to the North Warren Chamber of Commerce.
The event will be reviewed.

If it is an approved event it will be posted on the website within 10 business days.

Date _____

Name of Event: _____

Date: _____ Time (Start time- end time): _____

Short Description of event: _____

Contact Person: _____

Phone: _____

Email: _____

Any community organization that may benefit from this event:

1: _____

2: _____

3: _____

Please mail or fax this form to the number listed below or fell free to drop it off at the North Warren Chamber building. Thank you!

North Warren Chamber of Commerce
3 Dynamite Hill
PO Box 490
Chestertown, NY 12817
Phone/Fax 518-494-2722