

NEW HANOVER TOWNSHIP

FALL FROLIC 2017

VENDOR APPLICATION

Vendor Name: _____

Vendor Address: _____

Vendor Telephone: _____

Vendor Email: _____

Vendor Website: _____

Describe Item for Sale:

Price Range of Items for Sale:

Special needs at the event: _____

Participation Fee – 1 Table - **\$25.00**

Signature