MCHC CRAFT FAIR VENDOR
APPLICATION

APPLICANT INFORMATION

Name:			
Phone:			
Current address:			
City:	State:	ZIP Code:	
VENDOR INFORMATION			
Booth type (crafts, Tupperware, Baked Goods, etc):			
		Table needed:YN	
Number of booth/booths:		Electricity: Y N	
EMERGENCY CONTACT			
Name of a relative:			
Address:		Phone:	
City:	State:	ZIP Code:	
Relationship:			
SIGNATURES			
I authorize the verification of the information provided on this form. I have received a copy of this application.			
Signature of applicant/s:		Date:	
		Date:	