

Vendor Booth Reservation Form

Name _____
Address _____
City, State, Zip: _____
Phone # _____
Email: _____
Contact _____ Website _____

Indoor 10x10 area with electric - 10 available Outdoor space with-
out electric

1-2 days \$50 per day 1-2 days \$45
3-5 days \$45 per day 3-5 days \$40
6-7 days \$40 per day 6-7 days \$35

We are asking all of our vendors to please provide services or prizes totaling \$50.00 to help support our Dingo Bingo Event. Please indicate your donation preference.

___ Cash ___ Product ___ Services

Number of booth(s) being reserved. _____

Please indicate which days you will be set up:

Sat.9/27th _____ Sun.9/28th _____ Mon.9/29th _____
Tues.9/30th _____ Wed.10/ 1st _____ Thurs.10/ 2nd _____
Fri.10/ 3rd _____

All vendors are asked to donate to "Dingo Bingo," products or services valued at \$50 . Vendors must provide their own table(s), tenting and proof of insurance. Set -up can begin on 9/26/08 after 7 PM and tear down can be done anytime up to and including the last day of the show.

ENCLOSE APPROPRIATE FEE PAYABLE TO: "ACDCA, Inc"

Please attach proof of liability insurance. Mail completed form, proof of insurance & payment to address below.

Booth assignment: _____ Location: _____

Date confirmation sent: ___/___/ 2008

Method of payment: _____ Check/M O (US funds)

Tax ID # _____

CONTACT: Karen Freeborn, Vendor Chair. Cell phone 570-854-8928 / email: castleheart@enter.net

MAIL COMPLETED FORM, PROOF OF INSURANCE & PAYMENT to:
Karen Freeborn, 20 West Hollow Rd, Nescopek, PA, 18635