



Vendor Registration Form

Rea's Harvest Country Fair

Saturday, October 15, 2011

Name: _____

Business Name: _____

Address: _____

Phone (Day): _____ Phone (Evening): _____

Email: _____ Fax: _____

of spaces _____ x \$50.00/space _____

of spaces _____ x \$75.00/space food vendor _____

_____ Require an electrical hook up for fee of \$10.00 (must bring 100' extension cord)

Rea's Farm Market, their employees, owners, or volunteers, shall not be liable for injury to person or property during arrival, event, or departure. I assume sole responsibility for collection of sales tax and direct payment to government authorities.

Signature: _____ Date: _____

Briefly describe what you sell:

_____ *Antiques / Collectibles:* _____

_____ *Arts / Crafts:* _____

_____ *Flea Market:* _____

_____ *Food:* _____

_____ *Other:* _____

Mail this completed form with your payment to:

Diane D Rea

Rea's Farm Market

213 Stevens Street

West Cape May, NJ 08204

609 884 4522 or Day cell 609 408 3219

Any Questions or Inquires Please Phone

