

FLEA MARKET TABLE REQUEST FORM

NAME _____ CALLSIGN _____

ADDRESS: _____

CITY, ST, ZIP _____

PHONE: (____) _____ CELL: (____) _____

E-MAIL address (email or SASE SPEEDS REPLY): _____

Number of Tables _____ x \$35 = \$ _____

Power: ___NO ___YES (\$50)

TOTAL ENCLOSED: \$ _____ **DATE** _____

Please make checks payable to "Huntsville Hamfest".

Types of Items For Sale: _____

Admission payable at move-in: Adults \$10; 12 and under free.

_____ ** (Enter initials) I acknowledge that I have read and will comply with the Huntsville Hamfest Vendor Policy **Mandatory in order for form to be processed.

State and / or City Sales Taxes are Responsibility of Seller and collected at the hamfest

Loyal and repeat vendors who want the same location each year must notify us ASAP of their intentions to attend this year's show. A payment is required by July 1st.

Please return this form with payment to:

Huntsville Hamfest Flea Market
Attn: Jim Spikes N4KH
P.O. BOX 12534
Huntsville, AL 35802
Phone (256) 679-8891

jimn4kh@gmail.com