



## Dennisville Day 2019

Saturday, October 5, 2019, 10-3:00

Petersburg Road (Route 610) & Hall Ave., Dennisville, NJ

Questions? [langel62484@gmail.com](mailto:langel62484@gmail.com)

### Art or Antique Vendor Rules and Regulations

**All artwork must be handcrafted by the applicant.** **NO** imports, kits or manufactured items. **NO** toys designed to propel objects.

Antique, vintage and replica goods are welcomed.

Space is limited and by invitation. Spaces are assigned on a first come - first served basis.

**Set-up:** Set-up time begins at 8:00AM and must be completed by 9:30AM. Vendors may drive in to unload their goods but will be asked to move their vehicles to a parking area.

#### **NO EARLY BREAKDOWN!**

Spaces are 10x10. There is no electricity. Vendor must supply their own table, chairs and pop-up tent.

Tables must be covered on all sides to the ground and all boxes and storage totes must be out of sight. Please make your area as attractive and professional as possible.

**NO** Alcoholic beverages of any kind may be sold or given away by any vendor.

**NO** radios, TVs, musical equipment or any other audio or video equipment will be allowed in vendor area.

The selling or giving away of balloons is **prohibited** because of environmental concerns.

This is a family event -- no loud or abusive language. DHHOA reserves the right to remove you from the event without refund.

Please leave area clean when you leave.

This is a **RAIN OR SHINE** event.

**REGISTRATION DEADLINE: SEPTEMBER 7th.** There are no refunds or credits after **SEPTEMBER 28th.**

# Dennisville Day Art or Antique Vendor Application

BUSINESS NAME: \_\_\_\_\_

TYPE OF PRODUCT(S): \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ Signature: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Special Needs? \_\_\_\_\_

Art or Antique Vendor Registration Fee (10x10 space)..... \$ 25.00

TOTAL AMOUNT ENCLOSED [Non-refundable after Sept. 28th] ..... \$ \_\_\_\_\_

Please enclose a check or money order payable to DHHOA.

Mail or email completed application to:

Leah McClure  
145 Main Street  
Woodbine, NJ 08270

DHHOA USE ONLY		
	<input type="checkbox"/> CASH	<input type="checkbox"/> CK
AMT. REC'D		
DATE REC'D		
REC'D BY INITIAL		
CK/M.O. #		