



GLENDI 2010

September 10, 11 and 12

VENDOR APPLICATION

NAME OF EXHIBITOR: _____

ADDRESS: _____

TELEPHONE: _____

E-MAIL ADDRESS: _____

TYPE OF PRODUCT (be specific): _____

COMMENTS: _____

I WOULD LIKE TO SET-UP THE DAY BEFORE – THURSDAY – SEPT. 9TH

I WOULD LIKE TO SET-UP ON OPENING DAY – FRIDAY – SEPT. 10TH

RENTAL FEE IS \$150.00 FOR THE 3-DAY PER 10' X 10' SPACE

_____ NUMBER OF CHAIRS NEEDED

_____ NUMBER OF TABLES NEEDED, ADD \$5/TABLE/DAY

_____ ELECTRICITY – 1 PLUG PER 10' SPACE / ADD \$15 DAY

* A NON-REFUNDABLE DEPOSIT OF \$25.00 IS REQUIRED

** PLEASE RETURN THIS FORM WITH PAYMENT TO:

GLENDI VENDORS
ATTN: LIZA PAPPAS
22 ST. GEORGE ROAD
SPRINGFIELD, MA 01104