



82nd Airborne Division Association

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Convention

PRINTABLE VENDOR APPLICATION FORM

VENDOR INFORMATION

COMPANY / FIRM NAME
(as shown on Federal Tax Return) _____

ALTERNATE NAME
if applicable / (doing business as) _____

POINT OF CONTACT NAME _____

PHONE _____ VENDOR EMAIL _____

VENDOR ADDRESS _____

VENDOR WEBSITE _____

TAX EXEMPT? Y or N

BOOTH INFORMATION

DESCRIPTION OF PRODUCT(S) FOR SALE _____

WHAT PAYMENT METHODS WILL YOU ACCEPT _____

WILL YOU NEED ELECTRICITY IF AVAILABLE
(FIRST COME FIRST SERVED)

TABLE COST IS \$150 PER TABLE.
HOW MANY WILL YOU BE REQUESTING? _____ X \$150.00 TOTAL AMOUNT _____

Must also provide an item or items that
exceed in value of \$150.00 for the auction,
to participate.

Please list the item or items that you
will donate for the auction _____

*Subject to available space. First come, first served.
Funds will be returned if there is no more space.*