



Vendor Agreement

Name of business or organization _____

Full Name of contact person _____

Contact person's phone number _____

What will be sold? _____

("Knockoff" merchandise is not permitted)

Will you have an assistant(s) ? Yes ___ No ___ If yes, how many? ___

Complete and return this agreement with a \$50. non-refundable vendor fee or pay \$75. (vendor fee + meal). Vendor assistant(s) may add a meal for an additional \$25 (per assistant).

Vendors send all fees and signed agreement to:

Attn. Valerie Cross
1215 Helen Drive
Millville, New Jersey 08332
Phone: (856) 466-9113
Email: valcross1215@comcast.net

**The donation of one item to be used as a door prize is requested but not required.*

Make checks payable to **Stephanie Brown Scholarship Foundation**. You are to provide your *own* table - no larger than six feet. The luncheon will be held at Eastlyn Golf Course/Greenview Inn, Vineland, New Jersey, April 25, 2020, from 12-4 p.m. Please arrive between 10:30-11 a.m. to set up. Feel free to contact me w/questions or concerns, and thank you for participating in our annual fundraiser event. I look forward to seeing you.

Sincerely,

//s//

Valerie Cross
Scholarship Chairperson