



Memorial Ride

VENDOR REGISTRATION

Business Name	_____
Contact Person	_____
Mailing Address	_____
City	_____ State _____ Zip _____
Telephone	_____ Fax _____
Email	_____ Website _____
Required space size	_____ Electricity required (circle one) yes no

DONATION: \$ 50.00/informational & not for profit vendors
 \$100.00 Retail Vendors (proof of insurance required,see attached)

SET-UP: September 24,2017
 7:00– 8:45AM (**ALL VENDORS MUST BE SET UP BY 8:45AM**)

BREAK DOWN September 24, 2017 5:00 p.m.

Mail Registration with payment BEFORE Sept. 15, 2017!!

North Township Trustees Office
 ATTN: Kelly Bridges
 5947 Hohman Avenue
 Hammond, IN 46320

Please make checks payable to: Wicker Park Memorial Fund

If you have any question please call 932-2530 ext 331