

VENDOR PARTICIPATION FORM

VENDOR BUSINESS NAME _____

VENDOR FIRST AND LAST NAME _____

VENDOR ADDRESS _____

VENDOR PHONE NUMBER _____ E-MAIL _____

WANT TO PROMOTE YOUR BUSINESS? **DISPLAY YOUR MERCHANDISE?**

Please consider displaying your merchandise at our event by renting a table at \$100 for a full day.

This fee includes an ad in our program.

Please book your table by e-mail at NorthShoreDanceSociety@gmail.com

PLEASE MAKE CHECKS PAYABLE TO "GLENCOE BALLROOM" and mail to 660 Vernon Ave, Suit 4, Glencoe, IL, 60022
CREDIT CARDS ACCEPTED WITH A 4% SERVICE CHARGE. PLEASE DON'T MAIL CASH.

CONTACT: 773.996.6617

