

Old Farmer's Day

VENDOR APPLICATION

45th Annual Old Farmer's Day

October 27 – 28, 2018

Name:	
Mailing Address:	
Phone Number:	
Email Address:	

Describe what you are selling:

Number of Booths Needed: _____
x \$30.00

For more information regarding booths please contact:

Kristin Brunett Havard 985-351-4867

Ethan Dunn 985-974-0395

Total Due: _____

****Please make checks payable to Old Farmer's Day****

Do you wish to stay in the same booth location? _____

If not, do you have a preference where to be? _____

Signature: _____ Date: _____

Return Application and Payment to:

Old Farmer's Day
Attn: Vendor Registry
PO Box 102
Loranger, LA 70446

Administrative Use Only	
Received by:	Date Received:
Form of payment:	Space #: