

Vendor Application for Olde Orchard Antique Mall

Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone: Home _____ Cell _____

Email _____ Vendor Code _____

Indicate what type of space you are looking to rent:

Booth size _____ Qty _____

Showcase _____ Qty _____

Indicate outlets you currently use for your merchandise:

_____ Private Sales and Home _____

_____ Antique Shop (where) _____

_____ Consignment (where) _____

_____ Shows (where) _____

_____ Flea Markets (where) _____

Please briefly describe the merchandise you most commonly sell or which you attempt to most often specialize in.

Application may be sent to: Olde Orchard Antique Mall
7381 State Highway 42
Egg Harbor, WI 54209

Application received _____ Vendor contacted _____ Accepted/Declined _____