

# 2019 Fall Bazaar

## Saturday, October 19, 2019, Mitchell County Courthouse REGISTRATION FORM

EXHIBITOR NAME: (Please Print) \_\_\_\_\_

BUSINESS/ORGANIZATION (If Applicable): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ DAY PHONE: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_ NIGHT PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Items for Sale:

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EXHIBITOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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