

VENDOR REGISTRATION FORM

Remit to: Shaun Brown, Treasurer, PO Box 723, Tenino, WA 98589
EVERGREEN CHAPTER, AMCA
TENINO SWAP MEET & SHOW

Space #

Name _____ Phone _____

Address _____

City _____ State/Province _____ Zip _____

Email _____

All vendor spaces are \$30 each. Camping at vendor space is \$5 per night. US funds only.

Space # requested _____ Number of spaces _____

Form of payment _____ Camping(\$5 per night) _____

All checks payable to: "The Evergreen Chapter" Total _____

Received by

I agree to hold harmless the City of Tenino, the Antique Motorcycle Club of America, the Tenino Motorcycle Drill Team and its members, for any mishap, fire, accident, theft, or loss while participating in the Swap Meet, field events, vending, or show.

Signature _____ Date _____

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