

Heluva Rukus SASS New York State Championship September 16-18, 2016 Sponsor/Vendor Registration Form



Date

All sponsors and vendors must complete, sign and date the form below and return it to: Keith Feldman $\,$

1203 Amsterdam Rd., Apt. B-1 Scotia, NY 12302

Additional information may be found on the attached sheet or at http://www.circlekre	gulators.com
Company Name:	
Name/Title:	
SASS Alias/Number (if applicable):	
Address:	
City/State:	Zip:
Phone: () Fax: ()	
E-mail Address:	
Web Site:	
Merchandise Type/Service:	
Amount: \$ Check Gift Certificate(s) Merchand	
Advertising/Artwork/Banner Included:	(Please specify)
TO BE COMPLETED BY VENDORS ONLY:	
Area Required: Tent/Display Area: ft. x ft. Vehicle: ft.	
Electrical Power Required (Y/N): Purpose: (Note: Electricity is VERY limited and will be reserved for those vendors needing it to conduct the conduction of the co	ct their business.)
Non-shooting Vendors (Shooting Vendors should include this on separate Sho Number of Friday Kebob Dinners: @ \$15.00 Number of Saturday BBQ Dinners: @ \$27.00	oter Entry Form): \$ \$
TOTAL ENCLOSED	\$

Signature