



# 2019 WINTER VENDOR APPLICATION

Third Thursdays, October thru March  
4:00– 7:00 p.m.

1520 Davidson Drive in Senior Center  
Reynoldsburg, Ohio 43068

PH:614-322-6839 Fax: 614-322-6880

Farm/Business Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Website: \_\_\_\_\_

Make, model & license number of vehicle: \_\_\_\_\_

**Please list the goods or crafts you will be selling during the following months:**

October/November

December/January

February/March

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please indicate the date(s) you will be selling at the market:**

October 17     November 21     December 19

January 16     February 20     March 19

