

For League Use Only : Check #/Date received _____ Verbal Confo Date _____ Space # _____

2020 Fall Flea Market Reservation Form
Event Date: October 3 (Rain date October 4)

Name: _____

Phone: _____

Address: _____

Email Address: _____

Special requests (all attempts will be made to fulfill these where possible): _____

RESERVATIONS:

\$15 DONATION **PER SPACE** FOR NON-LEAGUE, OR
\$10 DONATION **PER SPACE** FOR ACTIVE WILLOUGHBY CIVIC LEAGUE MEMBERS.

NUMBER OF SPACES REQUESTED _____
x AMOUNT PER SPACE _____ =
\$ _____ TOTAL AMOUNT DUE

PAID BY CHECK # _____

Make checks payable to Willoughby Civic League and mail along with this completed and signed reservation form to: **Willoughby Civic League, P.O. Box 8654, Norfolk VA. 23503.**

Due to the high demand and limited number of spaces for this special event, reservations are only accepted and guaranteed by receipt of payment in full.
No refunds for no-shows.

FYI: Space for the event is a standard parking space in the lot. No tables are provided. On the day of the event, set up time will be from 6-8am.

WILLOUGHBY CIVIC LEAGUE FALL FLEA MARKET VENDORS AGREE TO PARTICIPATE AT THEIR OWN RISK AND AGREE TO ABIDE BY ALL LOCAL, STATE AND FEDERAL LAWS GOVERNING SUCH EVENTS. THOSE FOUND IN VIOLATION WILL BE ASKED TO LEAVE IMMEDIATELY.

_____/_____
Signature of Vendor Date