**INVITATION TO EXHIBITORS**

Shopping Expo Saturday, Nov. 2, 2024 - 9:00 AM – 3:00 PM

**REGISTRATION DEADLINE: Oct. 20, 2024**

**Non-Refundable after Oct. 28, 2024**

Fee:       $30/table/space with 2 chairs (you may bring shelving units and other displays)

Table location will be based on time of registration and if electrical outlet is needed (only a few available).

Mail this application to:              Fredonia First Methodist Church

                                                                Attn. Family Ministries c/o June Francis

                                                                [25 Church St.](https://www.google.com/maps/search/25%2BChurch%2BSt.%2BFredonia%2C%2BNY%2B14063?entry=gmail&source=g)

                                                                [Fredonia, NY 14063](https://www.google.com/maps/search/25%2BChurch%2BSt.%2BFredonia%2C%2BNY%2B14063?entry=gmail&source=g)

Type of product: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

City, State, Zip code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Day Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Night: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee: $30/table payable to Fredonia First Methodist Church.

With my signature below, I assume all responsibility and liability for losses, damages and claims to my person or property. (If you currently hold a certificate of insurance, please provide a copy at the time of application.)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If more information is needed, please call 716-679-1513 and leave a message.)