

EXHIBITOR APPLICATION

12th WHOLISTIC HEALTH & COMMUNITY FAIR

Saturday, April 14, 2012

10:00 a.m. – 4:00 p.m.

SUNSHINE PARK MALL
2400 SOUTH RIDGEWOOD AVENUE
SOUTH DAYTONA, FLORIDA

Your Name _____
Business or Organization _____
Address _____
E-mail and Phone _____

**ALL VENDOR SPACES ARE 10' BY 10'
8'X3' TABLE WILL BE PROVIDED – PLEASE BRING YOUR OWN CHAIRS**

**ONLY \$75.00 per vendor before January 15th
January 16th – April 1st, \$95.00
(no refunds after April 1, 2012)**

Credit Card Payment only on Pay Pal website

****PLEASE INCLUDE \$5.00 ADDITIONAL CHARGE FOR PAY PAL****

****PLEASE ADD \$20.00 IF YOU REQUIRE AN END SPACE****

--END spaces are extremely limited – reserve early!--

End Space, \$20.00 additional _____
No Charge for Electrical Outlet or Other Needs _____

Please make check payable to: WHOLISTIC HEALTH FAIRS LLC

**Mail check with completed application to:
816 IRON HORSE ROAD, DAYTONA BEACH, FL., 32114-5900**

For further details, please contact: 386.248.1868, kzdab@bellsouth.net

****PLEASE DO NOT SEND CHECKS TO SUNSHINE PARK MALL****

OUR 12TH FAIR AND IT WILL BE AMAZING! ☺

