

Make check payable to **COLLAR CITY CLAY GUILD** and mail to:

Kathy Benson
1020 Simonds Road
Williamstown, Ma 01267

VENDOR APPLICATION (please print)

NAME _____

COMPANY NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL _____

_____ I am a current paid member of the CCCG

_____ I am including my membership fee (\$25.00) with my booth space fee

Please list your choice of space(s) in order of preference

1. _____
2. _____
3. _____

I would like to reserve a table. _____

Preference is given to 2nd floor vendors

All effort will be made to honor your request but this is a *“first paid/first assigned”* basis

Booth fee is not refundable after October 15th, 2021