

REGISTRATION FORM – COMMUNITY YARD SALE

Sponsored by the Friends of Milanof-Schock Library

Date: Saturday, _____

Rain or Shine

Time: 7:00 am to 2:00 pm

Location: Milanof-Schock Library
1184 Anderson Ferry Road
Mount Joy, PA 17552

Name: _____

Address: _____

Phone: _____

The cost of each space (15 x 10) is \$15.00.

Number of spaces requested _____ @ _____ each,

Total cost = _____

Vendors must supply your own table and chair.

Vendors are not permitted to sell the following:

Food and drinks, Firearms, and Adult materials.

SEND REGISTRATION FORM AND CHECK PAYABLE TO:

Friends of the MSL
c/o Diane Creveling
1184 Anderson Ferry Road
Mount Joy, PA 17552