

Midway Antique Mall

DEALER APPLICATION

Dealer Information (please print)

Name _____ Date _____

Address _____ Phone _____

_____ email _____

What kind of space are you looking to rent? (circle what applies)

Booth size _____ Wall _____ Showcase _____ Shelf _____

What are you looking to sell?

Do you have experience as a Dealer? Yes No

If so, where? _____

Signature _____

Date _____