



Candia Old Home Day

P.O. Box 105 Candia, NH 03034

candiaohd@gmail.com

www.candiaoldhomeday.com

Organization/Business: _____

Contact Name: _____ Phone Number: _____

Email: _____

PLEASE CHECK:

- Business
- Organization

VENDOR DESCRIPTION:

VENDOR FEE:

- Organization Registration due by August 1, 2026: **\$15** for 10' x 10' area
- Business Registration due by August 1, 2026: **\$20** for 10' x 10' area

TOTAL ENCLOSED: _____

PLEASE NOTE:

- ➔ Please enclose proper payment if you would like **more than one** 10' x 10' area.
- ➔ Please provide your own tables, power cords, chairs, tent, etc.

I have read & agree to comply with the attached Policies and Guidelines.

Signature: _____ Date: _____

PLEASE RETURN TO:

CANDIA OLD HOME DAY
P.O. BOX 105 CANDIA, NH 03034

PLEASE MAKE CHECKS PAYABLE TO: CANDIA OLD HOME DAY