



2017 Show Application

Vendor Name: _____

Business Name: _____

Mailing address: _____

Phone number: _____

Email: _____

How do you normally display your product? (Tables, shelves, walls, etc.)

Description of your product:

Other Information you would like to share:

*** Please remember that an application is not considered complete until the application form and photos of your work have been received by mail (PO Box 2065, Palmer, AK 99645) or email (Stacey@badgirlsofthenorth.com).