



Centennial Flea Market

East Dakota Ave

July 3 ♦ July 4 ♦ July 5

REGISTRATION FORM

Last Name: _____ First Name: _____

Address: _____

City/State/Zip: _____

Registration Fee: \$5 per 10 x 10 space

I am registering for _____ spaces. Enclosed is _____

Sale of all food items are prohibited. No tables provided. Space is limited.

Release: I hereby release the sponsors, organizers and any persons, officially connected with this event from all liability for any injury, death or damages. I permit the organizers of this event to use photographic imagers taken during the event for promotional purposes. I agree to abide the guide lines listed below set forth by this organization and all applicable city and state ordinances and laws.

Signature: _____

Make checks payable to: Gilbert Centennial Celebrations
Send completed form and payment to:

Gilbert Centennial Celebrations 2008
Attn: Flea Market
PO Box 871
Gilbert, MN 55741

Payments must be received by Friday, June 27th.