## Vendor Candidate Profile

| Dealer Name: |  |
| :--- | :--- |
| Address: |  |
| Home Phone: |  |
| Cell Phone: | Alternate Phone: |
| Email Address: |  |

Best way to contact you (circle one): Home Cell Email Other: $\qquad$
Do you have a store or other booth rental location? Yes / No
If so, where? Name \& Location(s) $\qquad$

Please list the type of merchandise you wish to carry at Miss Lucille's Marketplace:
$\qquad$
$\qquad$

What size booth are you interested in? $\qquad$ How did you hear about Miss Lucille's? $\qquad$
Do you wish to participate in any themed/holiday events? Yes / No
Please list degree of availability for such events: $\qquad$

Please attach photos to show example of merchandise.
Note that booth size, merchandise, quality, and factors other than date of application determine available space. Thank you for your interest in Miss Lucille's Marketplace.

## Miss Sucillés Marketplace

2231-A Madison Street Clarksville, TN 37043
Tuesday-Saturday 10:00AM-6:00PM Sunday 12:00-5:00PM

