

STAFF USE ONLY

2012 ALL CHEVY SUPERNATIONALS REGISTRATION

VENDOR

NAME (COMPANY) _____

CONTACT PERSON _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____ E-MAIL _____

BRIEF DESCRIPTION OF MERCHANDISE AND/OR SERVICES VENDING _____

Amount Enclosed _____ Signature/Date _____ / _____

Make all checks payable to: "ALL CHEVY SUPERNATIONALS"

Fill Out & Mail To: "ALL CHEVY SUPERNATIONALS" • 1751 Old Parrottsville Hwy., Parrottsville, TN 37843