



www.AlaskaVendorsAssociation.org

P. O. Box 221845
Anchorage, AK 99522-1845

MEMBERSHIP FORM

NAME: _____ DATE: _____

BUSINESS NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

PHONE #: _____ ALTERNATE PHONE #: _____

Currently a vendor at these events: (Please Circle) Alaska State Fair / Tanana Valley State Fair / Anchorage Market / Kenai Peninsula State Fair / Seward July 4th / Forest Fair / Three Barons Fair

Other _____

Make Checks Payable to: Alaska Vendors Association
The Sum of \$50 Dollars

DATE: _____ AVA Representative: _____

Check #: _____ Cash: _____

Receipt # _____

AVA RECEIPT FORM

RECEIVED FROM: _____

BUSINESS NAME: _____

\$50 ANNUAL DUES

DATE: _____ AVA Representative _____

Check #: _____ Cash: _____

Mail in option - Please fully complete the above form and mail with payment to:
ALASKA VENDORS ASSOCIATION

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Anchorage, AK 99522-1845

Stay in contact throughout the year – check our association website online! Attend quarterly board meetings – contact AVA board through website or call.