



DAY: **Saturday**
 PLACE: Lysander Town Hall
 8220 Loop Rd
 DATE: September 26, 2020
 TIME: 8 am to 2 pm
 (Rain or Shine)

- Restrooms
- Food Truck
- Off the Street Parking
- Many different vendors at one location
- Rescue Mission Truck / Donations

For More Information Call Lysander Parks Office at 315-635-5999

Vendor Space: 20 x 20	\$10	Make Checks Payable to:	Town of Lysander
20 x 30	\$15	Mail Registration to:	<i>Lysander Parks & Recreation Dept. 8220 Loop Rd, Baldwinsville NY 13027</i>

JUNK SALE REGISTRATION FORM

NAME: _____ M/F: _____

BIRTHDATE (under 18 yrs. old): _____ AGE: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE (C): _____ (H): _____

Email address: _____

Program: Annual Junk Sale Fee: _____ \$

Refunds: Full refunds are given if we cancel the class. Refund - minus a \$15.00 administrative fee will be given for checks, cash & credit card payments until the day after 1st class. No refunds for "one time" classes. Photos taken for publicity purposes may be used on the Town Web Site, on our facebook pages, in local newspapers or in our brochures, unless otherwise noted by a parent. As the participant, parent or legal guardian of the above named participant I accept full responsibility for any and all injuries which may arise out of participation in the program(s) being registered for and hereby release the Town of Lysander, its agents and/or employees from any claims of any nature whatsoever arising out of my/my child(ren)'s participation. Consent is hereby granted to allow myself/my child(ren) to participate in the program(s) listed above. There is no medical insurance for any programs. I have read, understand, and agree to the policies listed on this page.

CREDIT CARD INFORMATION

- **I understand there will be a 2.45% fee with a minimum service charge of \$3.00 for using a credit card**

MUST BE FILLED OUT IN ORDER TO PROCESS:

MC DISCOVER VISA American Express

EXP. DATE: _____

CARD NUMBER: _____

CARD HOLDER'S NAME _____

----- OFFICE USE ONLY -----

DATE: _____ DOD: _____

CHECK: _____ CASH: _____ AMT: \$ _____

CHARGE: _____

AUTH#: _____ REF#: _____



 Parent Signature