

Name: _____

Address: _____

Phone: _____

E-mail: _____

Number of Ft Tables Requested: _____

Preferred table location and Cost: ___ Wall \$30 ___ Aisle \$25

Total Amount Enclosed: \$ _____

Table requests are filled on a first come, first serve basis. Stage space is available also on a first come, first serve basis.

Vendor check-in 8:00 AM, General Public-9 AM

One admission per paid table, General admission - \$5.00, Ladies and Children under 12 Free

Make checks payable to Westminster AeroModelers. Mail form and check to:

John Chamberlain
3802 Athleen Dr
Mount Airy, MD 21771

Phone: 410-596-3052
Email: rcim@comcast.net

Food Available, 50/50 Raffle

WAM is a Friendly Helpful Club