

**2011 National Encampment
Vendor / Display Tables**

Name _____

Street _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

Reserve ___ Tables @ \$20 each Total \$ _____

Reservations will be confirmed via email. Send this form with check (payable to **MD Dept, SUVCW**) prior to July 31, 2011 to:

2011 Encampment Vendor/Display Tables
c/o PDC Michael Paquette
11901 Branchwater St.
Fredericksburg, VA 22407-6701