



Vendor or Organization Name:

Name: _____

E-Mail : _____
REQUIRED

Home address:

Text: _____

VP: _____

How many people: _____

TOTAL: \$ _____ Non-Refundable

Vendor must bring own canopy, chair and table. Vendor must purchase dinner combo. Your optional for lunch.

Write check or money order: Payable to Deaf Pig Roast

Mail to Bennie Lacks

704 Bellows Ways Apt # 101 ,

Newport News, VA 23602

POST MARK by September 23, 2017

Tickets will be held for you at the DPR Admission Booth.