





VENDOR REGISTRATION FORM

THIS FORM MUST BE RETURNED TO ROSEMARY PANNO NO LATER THAN TUESDAY, OCTOBER 1, 2024.

Thank you for participating! Please email this form, along with your logo as a .jpg file, to md@njcma.org to be included in our tasting booklet.

Vendor Name	
Name & Title of Person Listed in Tasting Booklet	
Business #	Email
	ITEMS THAT WILL BE POURED (PLEASE PRINT)
Additional Notes	№ Requirements

CONTACT ROSEMARY PANNO WITH ANY QUESTIONS



Q 201.891.4480 x611

www.njcma.org

THANK YOU



