



Vendor Membership Form: \$250

You may also join/renew online at www.dancenj.org. It's fast and secure!

Date: _____ Circle one: New Member Renewal

Owner Name: _____ Title: _____

Business Name: _____

Business Address: _____

City/State/Zip: _____

County: _____ Phone: (_____) _____

Email: _____

Website: _____

Vendor Membership: \$250

Listing on website vendor directory
Job postings & special events promoted on website & social media
One free vendor booth at one DanceNJ event
Quarter page in all DanceNJ programs

Payment Details:

Total amount: \$ _____

Check one:

____ Check # _____ ____ Cash
____ Credit Card ____ Money Order

Please return completed form with check payable to:

Dance New Jersey
P.O. Box 1396
Montclair, NJ 07042

____ I would like to support the work of DanceNJ with a tax-deductible donation of \$ _____ in addition to my membership dues.

For more information or questions, contact cristina.dancenj@gmail.com or 973-222-8844.

THANK YOU FOR YOUR SUPPORT!

Updated 2.1.17