



St. Andrew the Apostle Church  
27 Kresson Gibbsboro Rd.  
Gibbsboro, NJ 08026  
856-784-3878  
[www.ChurchofStAndrews.org](http://www.ChurchofStAndrews.org)

**Annual Holiday Market and Craft Fair**  
**November 22<sup>nd</sup> and 23<sup>rd</sup>, 2025**  
**9:00 AM – 2:00 PM Saturday, November 22<sup>nd</sup>**  
**9:00 AM – 1:00 PM Sunday, November 23<sup>rd</sup>**  
Attn: Msgr. Louis A. Marucci, Pastor  
Email: [MsgrMarucci@ChurchofStAndrews.org](mailto:MsgrMarucci@ChurchofStAndrews.org)

**VENDOR APPLICATION**

Organization / Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Two day rate: \$90 per space**

**Singe day rate: \$75 per space**

Describe nature of business: \_\_\_\_\_

**Promotional area requirements:**

Corner Space Location – Additional \$10 per space: \_\_\_\_\_

Rental Tables – Additional \$10 per space: \_\_\_\_\_

Electrical Outlets – Additional \$10 per space: \_\_\_\_\_

**Total \$\$ Amount Due Upon Registration:** \_\_\_\_\_

Do you have a display banner? \_\_\_\_\_

List the names of individuals who will be present at the booth: \_\_\_\_\_

I acknowledge that my organization will abide by the guidelines set forth by St. Andrew the Apostle Parish for participation as a parish Holiday Market vendor. ***Please include check with total amount due with application.***

\_\_\_\_\_  
Applicant Signature and Date

\_\_\_\_\_  
St. Andrew the Apostle Representative Signature