THE 20th ANNUAL FISHING FLEA MARKET and Fishing Collectible Show.

At Antrim Elementary School, With full use of the GYM, the CAFETERIA and the HALLWAYS.

DATE: **Sunday, February 22, 2015** TIME: 8:30 AM – 2:30 PM

WHERE: Antrim School, 401 Niblick St., Pt. Pleasant Beach, NJ 08742

SPONSORED BY: Ocean Fire Co. #1

COST: \$30 per TABLE or SPACE. TABLES ARE LIMITED to 130 extra tables in the hallway, not listed on diagram, for those who send in their application late.

SET-UP TIME: 6:30 AM

There will be NO PARKING OR OFF LOADING FROM THE FIELD or Behind the fencing
PLEASE NOTE:

* New or used merchandise is acceptable. * Tables will be assigned on a first come, first served basis.

PRIORITY WILL BE GIVEN TO THOSE VENDORS WHO RENT MULTIPLE TABLES/SPACES.

* Refreshments will be available for purchase.

DIRECTIONS TO ANTRIM SCHOOL:

From NORTH: Parkway South to exit 98; follow signs for Rt. 34 South; take Rt. 34 South to Rt. 35 South; go over the Brielle Bridge into Pt. Pleasant Beach, go to the third light; make a left onto Arnold Avenue, go through the next light and over the R.R. tracks to the second block on the left, TURN LEFT onto St. Louis Ave and follow to the end of St. Louis, which dead ends into ANTRIM SCHOOL.

From SOUTH: Take GSP to exit 90 to Rt. 70 East to Rt. 88 East; take Rt. 88 East until it turns into Rt. 35 North; (approx. 5 miles); go to the third light (1/2 mile); make a right turn onto Arnold Ave, cross the R.R. tracks to the second block on the left, TURN LEFT onto St. Louis Ave and follow to the end of St. Louis, which dead ends into ANTRIM SCHOOL.

ASSUMING there is no snow, parking for vendors will be available BEHIND the school. Please UNLOAD, and then QUICKLY move your vehicles, allowing other vendors room to unload.

PLEASE, **DO NOT USE** THE FIRE COMPANY'S RETURN ADDRESS! ALL RETURNS ARE TO BE SENT TO: Daniel L. Miles 121 Trenton Ave. Point Pleasant Beach, NJ 08742

PLEASE MAKE CHECKS PAYABLE TO: OCEAN FIRE CO. #1

NAME: # of Helpers that will accompany you _____

ADDRESS: City State Zip ___

TELEPHONE: EMAIL ADDRESS: TOTAL \$ ENCLOSED: ____

OF TABLES: # OF SPACES ____ TOTAL \$ ENCLOSED: ____

YOUR CHOICE OF TABLE(S) – BASED ON THE DIAGRAMS.

GYM CAFETERIA HALLWAYS ____





