

Orland Township  
**Senior Trunk and Treat**  
Vendor Registration Form

14807 Ravinia Avenue • Orland Park • IL • 60462 • (708) 403-4222

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

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

**Registration Fee:**

- \$10  
 Non-Profit (FREE)

Amount Total: \_\_\_\_\_

Notes: \_\_\_\_\_

By signing here, I understand that this event is NOT designed to sell products. Vendors are asked to provide information, free giveaways, and/or candy only. This is an opportunity to let the community learn about what you have to offer!

**X** \_\_\_\_\_

**PLEASE MAKE CHECK PAYABLE TO  
“ORLAND TOWNSHIP SCHOLARSHIP FOUNDATION”**

If mailing in your check, please write on the outside of the envelope, “Trunk & Treat”, include this form and mail to:  
Orland Township 14807 Ravinia Ave., Orland Park, IL 60462

If paying with cash, please bring the above-mentioned forms to the Orland Township Administrative Office.  
If paying by Credit Card, billing information is needed:

Name (as it appears on card): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Card Used: (Circle One)    Visa                      Master Card                      Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ V Code (3-digit code on back): \_\_\_\_\_

For additional information needed, please call Alexandria Shipyor at 708-403-4222 or by email:  
[alexs@orlandtownship.org](mailto:alexs@orlandtownship.org)