

PEACEMAKING PROGRAM OF THE NAVAJO NATION



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Administration Office Technician

Resource Booth Application Form

Your application will not be considered without submitting the information requested. Please read and complete this application carefully.

CONTACT INFORMATION:

Business/Organization/Group/Individual: _____

Contact Person: _____

Phone Number: _____

Alt. Phone Number: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Description of Booth: _____

*Attendee will be responsible for their space cleanliness. Peacemaking Program and Navajo Nation Museum will not be responsible for any damages, injuries, or losses that occur while vendor is attending the event.

Signature of Attendee: _____

Date: _____

Tables will be provided upon request.

Please return to: m.honyumptewa@navajo-nsn.gov *Ahehee.*