

2nd Time Around

An Irish Dance Dress Sitting Service

Number#

Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Home Phone: _____ Cell Phone: _____

Contact Information

Hotel Name: _____ Room Number: _____ Dance School: _____

E-mail Address: _____ Cell Phone: _____

When do you leave to go home? Mon. Tues. Wed. Thur. Fri.

Dress Information

Color: _____ Fabrics: _____

Who Made it: _____ When was it made: _____

How many times has it been worn: _____ How many owners: _____

What condition would you consider this dress: Excellent Good Fair Poor

Items that come with the dress: Hairband Tiara Bloomers Other: _____
(Please Specify)

Is it worn or stained: Yes No If yes please explain: _____

Seller will accept: Cash/MO Check Make Check Payable to: _____

List Price: \$ _____ Is 2nd Time Around allowed to offer the minimum amount for the day? Yes No If yes, please fill in info below

For office use only					
*Minimum amount you will take:	Fri. \$	Sat. \$	Sun. \$	Mon. \$ XXX	Tues. \$ XXX

If an amount is offered that is lower than the minimum for the day do you want to be called: Yes No

*If you listed a minimum amount your price tag will state the List Price and Or Best Offer. If no Minimum amount is listed only the List Price will be on the tag. Minimum will be offered only if buyer offers a lower amount than the minimum for the day.

Rules and Waiver

I agree to allow 2nd Time Around to sell my property at this event, following the guidelines stated above. 2nd Time Around, IDTANA Sothern Region, IDTANA, the venue where the shop is located, its employees and any committees or volunteers involved in 2nd Time Around are not responsible for loss, theft or damage to items left in care of the shop.

Note: Only Volunteers will see this form. All information is confidential.

Print name _____ Signature _____

SHOP FEE: \$25	Cash	Check #	Payable to: IDTANA Southern Region	Shift
SOLD:	Cash	Check#	Make checks payable to the seller	D/L#:
Name:	Phone#		School/TCRG	
SELLER RECEIVED:	Cash	Check	Dress	Accessories
Signature:				Date: