



## VENDOR REGISTRATION

**OCTOBER 30, 2021**

**APPLICANT NAME:**

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**BUSINESS NAME (if applicable):**

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**PHONE NUMBER:**

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**EMAIL ADDRESS:**

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**TYPE OF ITEMS TO BE SOLD (if applicable):**

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**VENDOR FEE:**      \$400 - 10x10 booth space

**PAYMENT INFORMATION:**

Name on Card: \_\_\_\_\_ Expiration: \_\_\_\_\_

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

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