

Approved/Preferred Vendor Application Form

Non-Refundable: **\$50.00** Payable to: **First Christian Church**

Company Name:

Address _____

City/State/Zip _____

Phone _____

Contact Name _____ Title _____

E-mail _____ Ph# _____

----- COMPANY INFORMATION -----

Organization Type: Sole Owner ___ Corporation ___ non-profit. ___

Contact Information _____ Ph# _____

Company's Web Site(s):

Will you be applying as a:

Sales Vendor ___ Demonstrator ___ Information booth ___

----- GENERAL INFORMATION -----

What size space do you require:

Single 6" Table indoor _____ Outside Space: _____

Describe what you would like to do at the Cape Coral Community event:

I acknowledge the event is for families and Cape Coral community members. Any behavior, items, or ads that are deemed inappropriate by event coordinators, church, and/or other vendors shall be removed immediately. I am responsible for myself as well as those in my party. I also acknowledge in the event that I do not comply with all rules and expectations set forth, I will also lose the Vendor fee of \$50.00 for each space reserved and will remove myself and those in my party. Parties are responsible for setup, take down, and clean up of vendor table and surrounding area.

Date: _____

Signature: _____