



Vendor Application (Shopping area)

Company Name: _____

Contact Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Fax: _____

Email Address: _____ Date of application: _____

Name & description of items(s) I will be selling or service I provide: _____

Please attach picture or website showing products or service you will provide.

You will be provided with an approximate 10'L x 5' D space with one 6' draped table and 2 chairs. You may bring any other props or displays that will fit into that space, you cannot bring in additional tables without prior approval. Each vendor will be provided with a sign displaying their business name. Vendors will be located within the social area where attendees spend the first 60-75 Minutes prior to the event and during the event. ***Please note, attendees are coming to swap clothing, accessories and jewelry for free so carefully consider the product you wish to sell. Promoting services would be non-conflicting with the event.***

_____ **\$50.00 per location**

_____ YES, I will need an electrical outlet

_____ I have enclosed a check payable to: Circle of Strength,
Mail to: 13476 45th St NE, St Michael MN 55376

_____ I would like to pay by credit card: Circle one: Visa Mastercard

Card # _____ Exp date _____

Name on Card _____

Billing address: _____

Signature: _____

Vendor agreement understanding:

- 1.) Vendor agrees to collect and pay their own sales tax and will not hold Circle Of Strength responsible
- 2.) Vendor agrees to set-up from 4:00PM-6:00PM and to tear down immediately following the close of the event and no earlier.
- 3.) Vendor agrees to advise Circle of Strength in advance of event should a cancellation be required. There will be no refunds within 2 weeks of event unless we are able to resell your exhibit space.
- 4.) Circle of Strength can refuse display of items that were not authorized in advance and/or a misrepresentation of vendors product or service.
- 5.) No sign, banners and displays will be allowed to hang from the wall, and or/columns.
- 6.) You will be responsible for your own monies, please do not ask the event staff for change.
- 7.) We encourage you to accept credit cards.
- 8.) Accepting personal checks is up to the discretion of each vendor. Circle of Strength is not liable for any returned checks.

I understand and agree to the above requirements.

_____Date_____

(type in name and date if you are emailing this form)

***Mail application to: Circle Of Strength at the address below
Or email to: joanne@circleofstrength.com***