



Conference Vendor Application Form

Business Information

Business Name:

Business Address:

City:

State/Province:

Postal Code:

Country:

Business Phone:

Email Address:

Website (if applicable):

Social Media Handles:

Contact Information

Primary Contact Name:

Title/Position:

Phone Number:

Email Address:

Business Details

Type of Business:

- Sole Proprietorship
- Partnership
- Corporation
- LLC
- Nonprofit

Years in Operation:

Tax ID Number (if applicable):

Business License Number:



Product or Service Information

Description of Products/Services Offered:

Price Range of Products/Services:

Do products/services comply with all applicable regulations and safety standards?

- Yes
- No

Do you require electricity, water, or other utilities at the event/location?

- Yes
- No

If yes, please specify:

Event Participation (if applicable)

Event Name:

Event Date(s):

Booth Size Requested:

Special Setup Requirements:

Insurance and Permits

Do you carry liability insurance?

- Yes
- No

If yes, please attach a copy of your certificate of insurance.

Do you have all necessary permits/licenses to operate?

- Yes
- No

Payment Information

Application Fee (if applicable):

Payment Method:

- Credit Card
- Bank Transfer
- Check
- Other



Agreement and Signature

By submitting this application, the vendor agrees to comply with all event rules, regulations, and policies. Approval of this application is subject to review and confirmation by the event organizers.

Authorized Signature:

Printed Name:

Date:

For Office Use Only

Application Received:

Reviewed By:

Approval Status: Approved Denied

Notes:

Date:

[END]