



## 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:**

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**For Office Use Only**

Application Received:

Reviewed By:

Approval Status: ☐ Approved ☐ Denied

Notes:

Date:

[END]