



VENDOR REGISTRATION FORM

VENDOR INFORMATION

Business Name: _____

Contact Name: _____ Phone Number: _____ / _____ / _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

VENDOR CATEGORY

- Commercial Vendor
 Mvskoke Made
 Food Vendor
 Agricultural Producer
 Educational / Agency

DESCRIPTION OF BOOTH / PRODUCTS

VENDOR SPACE REQUESTED

- Indoor Booth
 Outdoor Space
 Livestock Area
 Demonstration Area

SETUP TYPE

- Table
 Tent
 Trailer
 Truck
 Other: _____

ELECTRICITY NEEDED?

- Yes
 No
 If yes, please elaborate

LIVESTOCK (IF APPLICABLE)

- Yes
 No
 If yes, please elaborate on species and #

ATTENDANCE

- Friday (7/17)
 Saturday (7/18)
 Both

I understand that a \$25 refundable deposit is required for vendors selling goods or products. Informational/Educational booths are not required to pay this fee.

Vendor Signature: _____

Date: _____ / _____ / _____



ONLINE REGISTRATION PREFERRED

To simplify vendor registration and booth selection, please register online using the QR code.

Online Registration Link:
<https://forms.office.com/r/caDjf1AR5m>



Scan to register online

Paper forms may still be submitted by email to cazbell@cmn.edu if needed

