



# Vendor Application

Saturday, May 11 • 10 a.m. to 1:30 p.m.  
Ascension St. Mary's Health Education Center  
800 S. Washington Ave., Saginaw

## Vendor Fees

Nonprofit vendors: FREE

For-profit vendors: \$25

Each vendor receives  
one 8-foot table & two chairs.  
Light refreshments provided.

**ALL** vendors need to bring a door prize item worth at least \$25. Please keep your prize at your table, and a representative will collect it from you before the event begins.

Vendors may begin setting up at 9 a.m. Please register upon arriving, and you'll be given a map with your booth location. Vendor is responsible for setup and tear-down. Vendors must set up by 9:30 a.m. Tear-down begins at 12:30 p.m. You may choose to stay until the end of the event, but there is no scheduled vendor visitation time after 12:15 p.m.

*Please note: Limited space prevents us from accommodating children at this event. Eligibility for door prize giveaways is limited to registered parents and caregivers; professional registrants and vendors are not eligible.*

**Lock in your space early! No duplicate vendors allowed. Vendor fee is nonrefundable.**

**\*\*\*Vendor fee and application due by Friday, May 3.\*\*\***

**Company/Organization:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Email:** \_\_\_\_\_

**Description of Goods:** \_\_\_\_\_

**Special Needs:** \_\_\_\_\_

**Electrical outlet needed? (circle one)**    **Yes**    **No**    |    **Vendor status (circle one)**    **Nonprofit**    **For-profit**

## Waiver (must be signed):

*I hereby release CAN Council Great Lakes Bay Region, Ascension St. Mary's, other sponsors or co-sponsors, and individuals from responsibility for any injuries or damages I may suffer as a result of my participation in this event. I will additionally permit the use of my name in broadcasts, telecasts, newspapers, brochures, etc. and also acknowledge that the vendor application fee is nonrefundable.*

*As a participating vendor, I certify that all the information I have provided on this form is true and complete. I have read the information provided for the event and certify my compliance by signature below.*

**Signature of Vendor:** \_\_\_\_\_ **Date:** \_\_\_\_\_



Return vendor application and fee to:

CAN Council Great Lakes Bay Region  
Attention: Community Baby Academy  
1311 N. Michigan Ave.  
Saginaw, MI 48602

Make checks payable to CAN Council Great Lakes Bay Region.  
For further information, call (989) 752-7226 or email [vharrison@cancouncil.org](mailto:vharrison@cancouncil.org).

FOR OFFICE USE ONLY: Date Received: \_\_\_\_\_ Paid/Check #: \_\_\_\_\_ Thank you: \_\_\_\_\_