



# Vendor Application

Saturday, August 27th

10am-1:30pm

1000 Tuscola St., Saginaw, MI 48607

## Vendor Fees

Non-profit vendors: FREE

For-profit vendors: \$25

**Let's help support our caregivers! All vendors are required 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 9am. Please register upon arrival and you'll be given a map with your booth location. The vendor is responsible for set-up and tear-down. Vendors must be set-up by 9:30 am. Tear-down begins at 12:30 pm. You may choose to stay until the end of the event, but there is no scheduled vendor visitation time after 12:15 pm.

*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! Due to limited space, duplicate vendors will not be accepted. Vendor fee is non-refundable.**

**\*\*\*Vendor fee and application due by Friday, May 20th\*\*\***

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

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

\_\_\_\_\_

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

Electrical outlet needed?  Yes  No | Vendor status  Non-profit  For-profit

### Waiver (must be signed):

*I hereby release CAN Council, Women of Colors, 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  
Attention: Community Baby Academy  
1311 N. Michigan Ave.  
Saginaw, MI 48602

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