

I AM THAT WOMAN BREAKFAST

9:00am – 1:00pm
(310) 902-2714

March / 2024

Vendor Registration Form

(Fill out form and return via email to jeri@empowertoimpact.org)

Company Name: _____ Type of Business: _____

Contact Name: _____ Phone: _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Selling Merchandise? No Yes Sellers ID # _____

What type items you will be selling? _____

Exhibitor Booth Options:

6' Skirted table w/2 chairs = \$300

6' Skirted table w/2 chairs (Ballroom) = \$350

FULL PAGE AD FOR VENDOR \$50 (Vendors Business or Organization)

Vendors will be announced on Stage.

Totals Booth Fee \$ _____ Sponsorship \$ _____ YOUR TOTAL COST \$ _____

To order or reserve exhibit space, this application and payment must be received in our office within 5 days of reservation. Your application will be accepted when this contract has been properly completed, is countersigned by Conference Management.

Payment Type

Check Enclosed Credit Card (Visa, MasterCard, Discover, AMEX accepted)

Credit Card Number: _____

Charge Amt: _____ CVV# _____ Expiration Date _____

Name on Card _____

Cardholder Signature _____

Statement Zip Code: _____ Date: _____

Signature I, as the exhibitor or an authorized representative for the exhibitor, have read and agree to abide by the above terms and conditions as well as those conditions set forth on the Terms & Conditions attached to this contract. I understand if my exhibitor booth is empty one hour prior to show start and no one is present to claim my booth that it may be forfeited without refund.

Print Name: _____ Date: _____

Signature: _____