



Vendor Contract

Vendor tables will be available Friday and Saturday, September 14 and/or 15, 2018. DWCF Members: \$50 per table per day Non-members: \$75 per table per day.

Please Print Clearly

Contact Person	Company/Organization	
Email	Address	
Phone	City	
Alternate Phone	State	Zip
Primary Vendor Representative		
Additional Vendor Representative 1		
Additional Vendor Representative 2		

Product, Service, or Organization Details: (Please provide a brief description of your products and/or services you plan to exhibit.)

We are members of the Democratic Women's Club of Florida (\$50 per table per day)
 We are NOT members of the Democratic Women's Club of Florida (\$75 per table per day)
 We are reserving _____ table(s) for Friday, September 14 at \$_____ per table = \$_____
 We are reserving _____ table(s) for Saturday, September 15 at \$_____ per table = \$_____

Total Amount Due: \$ _____

 Vendor Signature Date

Please mail this form and check payable to DWCF Convention 2018 and mail to:

Barbara Murphy
 29 Cherokee Ave
 Palm Coast, FL. 32137

For more information, contact:

Barbara Murphy, Convention Vendor Committee Chair
 Phone: 770-596-9697 E-Mail: sculbones@gmail.com