



**Vendor Application (Please Print or Type)**

First \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Email (*please clearly print a regularly monitored account*) \_\_\_\_\_

How did you hear about Show? \_\_\_\_\_

Company Name \_\_\_\_\_

Website \_\_\_\_\_

**All applications must be accompanied by photographs of your merchandise or a website if you are a new vendor. Please submit payment with application.**

Please list general merchandise and retail price range \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please Indicate Preference of booth location (This does not guarantee placement, as requests will be granted on a first come first served basis.)

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

Indoor Space (\$175) \_\_\_\_\_ # of Booths \_\_\_\_\_ 10x20 Outdoor Space (\$175) \_\_\_\_\_

Do You Need Electricity? \_\_\_\_\_

***Vendor shall not be entitled to a refund or any part of any fee should he/she be unable to participate after acceptance.***

**Requested Show Date (Only Check the Show you are paying for at this time)**

\_\_\_\_\_ March \_\_\_\_\_ November

**(If paying by Credit Card, attach authorization form)**

Payment Method: Cash \_\_\_\_\_ Check# \_\_\_\_\_ Amount \_\_\_\_\_ (Make Checks to City of Angleton)

**Mail Form to: Martha Eighme  
121 S Velasco  
Angleton, TX 77515  
(979) 849-4364 x2111  
Fax: 979-849-5561**

**Email Coordinator: [meighme@angleton.tx.us](mailto:meighme@angleton.tx.us)**