

# SPH Expo Vendor Application

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

Describe the types of items you plan to sell or serve \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of spaces needed \_\_\_\_\_

Electric/Water Yes \_\_\_\_\_ No \_\_\_\_\_ AMPS \_\_\_\_\_

Generator Yes \_\_\_\_\_ No \_\_\_\_\_

AMOUNT ENCLOSED \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date