

Online Vendor License Application Form

Complete this form to apply for a vendor license for your upcoming event.

Event Details

Event Name:

Event Date:

Event Location:

Vendor Information

Business/Vendor Name:

Contact Person:

Email Address:

Phone Number:

Business Type & Description

Type of Business:

--Select--

Please provide a short description of your products/services:

License Details

Current Vendor License Number (if any):

Do you have liability insurance?

--Select--

Do you require electricity?

--Select--



Requested Booth Space (dimensions or description):

I have read and agree to the [event terms and conditions](#).

Submit Application