**JOURNEY UNITED METHODIST CHURCH Vendor Registration**

Please complete all sections of this form to apply for a vending space at the event. You can download and mail the registration to Journey United Methodist Church, 1901 Iverson Street, Temple Hills, MD 20748 or email it to umcredeemer@verizon.net.

**Terms and Conditions:**

* There is a thirty dollar ($30) fee for a single table space. Any items outside of the pre-assigned space you will be charged for two (2) tables (no exceptions).
* JUMC Event Coordinators may choose to deny a vendor based on the appropriateness of their products (no alcoholic beverages or any items that are deemed to be racist, sexist, anti-American or anti-religious will be allowed).
* Vending table spaces will be set up around the perimeter of the lawn.
* Participants are responsible for the setup and cleanup of their vending area. ***Due to the COVID-19 pandemic, please note that you are responsible for providing your own chair(s).***
* Vendors will not be permitted to move locations once all spaces have been assigned. Please continue to maintain the social distancing guidelines (6 foot rule).
* Electrical access is limited.
* Setup of table spaces can begin at least two (2) hours prior to the event start time. **WE ASK THAT ALL DISPLAYS/SET UPS TO BE COMPLETED BY THE EVENT START TIME**.
* No refunds will be given once your table setup has taken place.
* JUMC will not be held liable for any damages or theft incurred to your merchandise. Please have someone available to supervise your table if you must step away.
* Vendors will keep the profits from their sales.

***Thank you for your support!***

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief description of product(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Tables \_\_\_\_\_\_\_\_\_

\*Would you be willing to donate to JUMC? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*Please see a committee member to leave your donation.*

**FOR OFFICE/EVENT STAFF ONLY - Please do not write below this line.**

**Amount Received:** $\_\_\_\_\_\_\_\_ Table/Space $\_\_\_\_\_\_\_\_ Donation

**Method of Payment:** Cash/Money Orders/Checks (Payable to Journey UMC)

**Received by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_