



VENDOR APPLICATION FORM VENDOR INFORMATION

COMPANY /FIRM NAME	VENDOR ID (IF APPLICABLE)
PRIMARY POINT OF CONTACT TITLE	TAX ID NUMBER
SECONDARY POINT OF CONTACT (IF APPLICABLE)	VENDOR ADDRESS
PHONE NUMBER	EMAIL ADDRESS
VENDOR WEBSITE	
PRODUCT(S)	ARE YOUR PRODUCTS FOR SALE (ENTER YOUR ANSWER): YES OR NO
INFORMATIONAL MATERIALS	ARE YOUR PRODUCTS FREE FOR DISTRIBUTION (ENTER YOUR ANSWER) YES OR NO
Please include items that will be displayed	Please include items that will be given away

Pricing:

- **NO** cost for FREE distribution of information and give aways
- \$100: The cost for items to sell | Pay via Zelle or PayPal: Treasurer@wodatlanta.org
- \$150: The cost for Food Trucks | Pay via Zelle or PayPal: Treasurer@wodatlanta.org
 - Nonrefundable payments must be submitted with your completed form.

Complete and submit this form **online** at www.wodatlanta.org or print, complete, scan and email your completed form to wodatlanta@gmail.com.