



**Vendor Application 2018.**

**Show date June 16<sup>th</sup>**

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

**Booth Operator Name** \_\_\_\_\_

**Company Address** \_\_\_\_\_

**Contact Email** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Hello and thank you for being a vendor. Please fill in the blanks to better help us place your booth in the correct area.**

**What size booth space do you require?**

**10X10 \_\_\_ \$100**

**10X20 \_\_\_ \$150**

**10X30 \_\_\_ \$200**

**Will you be selling goods or providing service the day of the show?**

**Goods \_\_\_**

**Services \_\_\_**

**Please give us a short description of your goods or services.**

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**No refunds**

**All fees will be donated to the charity**

**We are also asking for a small donation to our raffle from each of the vendors such as goods and/or services. All proceeds from the raffle will be donated to the charity.**

**Vendor move in time is from 6:00am to 9:30am.**

If you require help setting up your booth unloading or loading your vehicle please call ahead as this service can be provided to you if needed. Money generated by the show through Vendor and Entrant fees are all donated to the charity. The money you make at the show belongs to you.

Top-Line would like to say thank you for your contribution to our show and we hope it is profitable and fun for you. (Bring an EZ up with weights and sun screen).

Please fax, mail or email this application to-  
**Fax (951)-769-9660 or call 951-769-9665 for more info.**  
**Mail to 101 California Ave, Beaumont Ca. 92223**  
**Email- [sambaldi@top-lineindustrial.com](mailto:sambaldi@top-lineindustrial.com)**

Carol's Kitchen Tax ID No 33-0819778



**VENDOR WAIVER:**

**By signing this waiver you are releasing Top-Line Industrial Supply of all and any liability. Top-Line Industrial Supply does not take responsibility for any broken, damaged or stolen goods, or possessions before, during or after the show. You as a vendor will be expected to display in a professional and tasteful manner.**

**If you do not meet these requirements Management and its personnel reserve the right to ask you to vacate the premises.**

**Thank You**

**Name:**

**(Please print)** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Your Vendor fee will go to the Charity.**