



Food | Chocolatiers Vendor Registration Form

Company Name _____
Contact Name _____ Phone _____
Address _____
City _____ State _____ Zip _____
Email _____
Business Website _____

Price includes:

10'X10' Space | Pipe and Drape | 8' Table |
(2) Chairs | Waste Basket | Table Covering

Please check which event(s) you will be participating in. Receive a 10% discount when registering for more than 1 event. Final payment for each event is due 30 days prior to event date.

	Date	Location	Venue	Time	Price
<input type="checkbox"/>	February 1, 2020	Durham, NC	Durham Convention Center	1-4p, 5-8p	\$75
<input type="checkbox"/>	February 22, 2020	Greensboro, NC	Greensboro Coliseum	1-4p, 5-8p	\$75

CHECK HERE IF YOU NEED ELECTRICITY

TOTAL: _____

10% Discount: _____
(if applicable)

FINAL AMOUNT DUE: _____

PLEASE SIGN HERE



Credit Card Form

Galaxy Events LLC
235 Walton St
Syracuse, NY 13202

Date: _____

Company Name: _____

Name on Card: _____

Phone Number: _____

Credit Card Billing Address _____

Card Type (Circle One): VISA MC AMEX DISC

Card Number: _____

3 (or 4 for AMEX) Digit Security Code: _____

Expiration Date: _____

Amount: \$ _____

Event(s): _____

No other charges will be authorized or made to the card without separate arrangements.

Client Signature _____

Date _____

Please call Lisa with any questions at 315-471-9597 or email lisa@galaxyeventscompany.com