



Walk 4 Wellness

Vendor Contract

The Villages Polo Field, 703 Buena Vista Blvd., The Villages, Florida
October 15th, 2016 9:00 AM to 12:00 PM

Date: _____

Sponsor Name: _____

Vendor: **\$100** _____

Address _____

Email Address: _____

City, State, Zip _____

Phone No: _____

Contact Name: _____

Alt Phone No: _____

_____ agree to provide personnel to attend to table(s) at all times during
Company Name

the event. We are aware that set up begins at 7:00 am and will be completed no later than 8:30 am. We agree not to begin tear down of our area any earlier than 12:00 pm. You will need to bring your own table, tent, chairs, etc. Extension cords are not provided. There are outlets along the drive but the power supply is not reliable for long stretches. Vendors requiring power for their tents need to provide their own Whisper Jet Generator. Outside banners can be positioned using strip ties and bungees only, nothing sticky.

Signature: _____

Date: _____

Sponsorship dollars are due when you sign up. Checks and completed contracts can be mailed to World Wellness Education, c/o Sharon Brown, 26810 Bull Run, Leesburg, FL 34748.

Payment by Visa or Mastercard Only

I (We) hereby authorize the World Wellness Education, Inc. to initiate debit entries, and corrections thereto my (our) checking, savings or charge card account indicated below and the depository credit card named below.

Name on Card _____

Credit Card/Debit Card Number _____

Expiration Date _____

CVV _____

Zip Code _____

First Pmt Amount _____

Date: _____

Final Pmt Amount _____

Date: 12/18/2015

I authorize the above payments to be made to World Wellness Education

Signature: _____

Date: _____

Deposit Rec'd by: _____

Date: _____