

THOMAS HEALTH EMPLOYEE ARTISAN SHOWCASE

Vendor Application

Friday, October 14, 2022

10:00 am - 3:00 pm

Thomas Hospital Pavilion Lawn

APPLICATION DUE TO THE FOUNDATION BY SEPTEMBER 23

PERSONAL INFORMATION

NAME:

HOSPITAL AND DEPT:

HOME ADDRESS:

CITY, STATE, ZIP:

HOME EMAIL:

CELL PHONE:

PRODUCT INFORMATION

DESCRIBE WHAT YOU SELL:

NOT PERMITTED: INDEPENDENT CONSULTANTS OF DIRECT SALES COMPANIES (MARY KAY, AVON, SCENTSY, THIRTY-ONE, ETC.)

WHAT IS THE PRICE RANGE OF YOUR ITEMS?

SPACE INFORMATION FEE \$25

EACH SELLER WILL RECEIVE ONE 10X10 SPACE. YOU MAY BRING YOUR OWN TABLE, OR CAN RENT FROM ONE. ADDITIONAL 10X10 SPACES CAN BE PURCHASED.

I NEED TO PURCHASE ADDITIONAL 10X10 SPACE FOR \$25 _____ NUMBER OF SPACES _____

PLEASE CHECK: I AM BRINGING MY OWN TABLE/CHAIRS _____ I NEED TO RENT TABLE/2CHAIRS FOR \$25 _____

NUMBER OF TABLES/CHAIRS _____

I WILL BE BRINGING A CANOPY/TENT _____

TOTAL \$ DUE TO THE FOUNDATION: \$ _____

Application may be submitted via email to Foundation@ThomasHealth.org,
Interdepartmental mail, or hand-delivered.

Vendors will be notified of approval/denial no later than September 26.