



41 Main Street, Winters CA 95694

info@winterscollective.com

VENDOR APPLICATION

1. Name:

Legal Business Name:

Address:

Email Address:

Phone Number:

2. Do you have a Business License?

3. Do you have a Resale License/Sellers Permit?

4. Options to Rent: Choose 1

- Large Booth
- Display Table
- Shelving Unit

5. Product Description (be detailed/attach pictures)

6. Have you been a part of a co-op/market before? Have you or do you have an existing retail business?

7. Do you have a logo? (attach)

8. Website/Social Media:

9. Do you have strengths in marketing/graphic design/web design?

10. Are there any additional ways you feel you could help or support the Collective?

11. Are you comfortable overseeing the Collective/working the POS? (up to 4-6 days a month, 4-8 hour shifts) This is a requirement of joining the Collective. Please give preferred schedule. (Tues-Sunday).

12. Are you open to putting your items on sale for special sales & events. How deep of a discount are you comfortable with?

*After you have been selected to join the Collective, please provide an inventory log. The Collective will have ultimate control over what comes in to the shop. We do not want vendors competing with each other; only complementing each other. You will be able to enter your inventory into the POS on your personal computer or store computer before opening with a vendor ID and have access to real time sales.

Vendor Sign & Print_____

Vendor Date_____

Owner/Manager_____