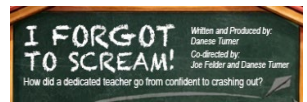


**WORSHIP ARTS MINISTRY VENDOR REQUEST FORM****March 21st and 22nd, 2026****THREE SHOWS, Saturday, 2:00pm and 7:00pm; Sunday, 3:00pm****Kennesaw Mountain High School****1898 Kennesaw Due West Rd, Kennesaw GA 30152****GENERAL VENDOR INFORMATION**

Name: _____

Business Name: _____

Current Address: _____

City: _____

State: _____ ZIP Code: _____

Day Phone: _____

Cell Phone: _____

Email Address: _____

Website Address: _____

VENDOR NAME

Types of goods or services to be sold: _____

of tables: _____

PAYMENT METHOD

The vendor registration fee is due at the time the form is submitted. A photographic image or softcopy/.pdf is acceptable and will be treated as an original copy of this application form. Preferred payment is by Zelle or Cash App (*See below*).

NO onsite vendor registration will be accepted. The lobby area is wide and spacious; however, Vendor space is limited and on a first come, first serve basis.

_____ **Registration is \$85.00 for Turner Chapel members for one table or \$150 for two tables**

_____ **Registration is \$110.00 for non-Turner Chapel members for one table or \$175 for two tables**

***Tables, chairs, a table cover and vendor signs will be provided. **Lunch on Saturday also included this year.**

Funds must be received by Sunday, March 8, 2026

LIABILITY WAIVER

I, _____, hereby release and hold harmless Turner Chapel AME Church, the Worship Arts Ministry, Kennesaw Mountain HS, Cobb County School District, and any parties associated with the same, from any and all liabilities associated with my participation as a vendor, including but not limited to personal injury and/or loss of or damage to property.

VENDOR TERMS

I agree to abide by the following vendor terms:

1. Vendor booths will not be open during the show.
2. Childcare not provided.
3. Vendors are responsible for overseeing their own tables.
4. Vendors are responsible for making their own change.
5. Vendors will have access to set up tables at 11:00 a.m. Saturday, March 21st.
6. Vendors must break down their tables no later than 1 hour after end of show, or 7:00 p.m. Sunday, March 22nd.

SIGNATURE OF AGREEMENT

(SIGNATURE SIGNIFIES YOUR AGREEMENT TO THE LIABILITY WAIVER AND VENDOR TERMS.)

YOUR SIGNATURE _____**DATE** _____

Please complete this registration form for each vendor and send the payment via:

Zelle® to Carolyn "CAROLINE" Crook at 404.861.5195 or CashApp at \$crocrook

Make checks payable to: Turner Chapel AME Church

Include a memo with your payment: WAM SP VENDOR FEE - <Your Name>

Please send the form by email to Gloria Cooper, Marketplace Manager: gloriafayecooper@gmail.com.

Payment still must be received by Sunday, March 8, 2026.

Note: Returned check fee is \$35

FOR OFFICE USE ONLY

Date Received: _____

Correspondence: _____

____ APPLICATION REC'VD

____ CASH

____ CONFIRM EMAIL SENT

____ PAYMENT REC'VD

____ CHECK

____ RECEIPT COMPLETE

____ MONEY ORDER