

**Vendor Information:**

<b>Business Name:</b>	<b>Name (First, Last) as it appears on method of payment:</b>
<b>Street Address as it appears on method of payment:</b>	<b>Email Address (for receipt):</b>
<b>City, State, Zip:</b>	<b>Phone Number:</b>

Please write which type of booth you wish to reserve: \_\_\_\_\_

**If paying by credit card:**

<b>Card #</b>	<b>Expiration Date and CVC Code:</b>	<b>Billing Name if different from above:</b>	<b>Billing Address if Different from above:</b>

I \_\_\_\_\_ herby authorize Revolutionary Events to charge the above card for \$ \_\_\_\_\_ for the purchase of The \_\_\_\_\_ Vendor Booth Package.

Please make checks payable to Revolutionary Events. To arrange cash payment, please call 586-842-2900 or email [booking@revolutionary.events](mailto:booking@revolutionary.events).

\_\_\_\_\_  
**Signature/Date**

I declare that the above statements are true and authorize Revolutionary Events to charge my card information listed above or deposit the check enclosed.