



Living Springs Family Worship Center Vendor Registration Form – Car Show

Event Date: January 24, 2026

Time: 8:00 AM – 2:00 PM

Location: 26471 FL Hwy 247, Branford, FL 32008

Mailing Address: P.O. Box 207, Branford, FL 32008

Vendor Information

Field	Response
Business / Organization Name:	_____
Contact Person:	_____
Phone Number:	_____
Email Address:	_____
Mailing Address:	_____
Type of Products / Services:	_____
Number of Booth Spaces Needed:	_____
Special Requests / Notes:	_____

Utilities & Requirements

- **Generator Required** (all vendors must provide their own)
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Registration Fee

- **Pre-Registration Fee:** \$50
- **Deadline January 10th**

Payment Instructions:

Make checks payable to **Living Springs Family Worship Center** and mail with this form to:
P.O. Box 207, Branford, FL 32008

Insurance Requirement:

All vendors **must provide a Certificate of Insurance** to participate.

Waiver of Liability

I hereby release **Living Springs Family Worship Center**, its staff, and volunteers from any liability for loss, damage, or injury during the Car Show event.

Vendor Signature: _____

Date: _____