



Pi Mu Phi Military Sorority, Incorporated 3404 Bradfield Drive Clarksville, Tennessee 37042

931-302-6310 Contact@pimuphimilitarysorority.org

APPLICATION FOR CERTIFIED VENDOR'S LICENSE PI MU PHI MILITARY SOROITY, INC

Company Name:		
Applicant Name and Title		
Address		
City State Zip Code		
Telephone Number(s)	Email	
Vendor Application Fee: \$125.00		
(Invoice will be sent to email once application	is received)	
This company is primarily:		
☐ Business Concession ☐ Manufacturer/V		
☐ Sole Proprietor ☐ Partnership ☐ Corpo	cation	
Type of Certification: New Application R Are you, or a key member of your comp If yes, please provide the financial member	pany a member of the sorority? Yes! No!	
Paraphernalia relating to the SORORITY	SE to manufacture, design, make, copy, sell, display or distribute, or containing the crest, symbols, or any trade name or trademark of the nature of such Paraphernalia and the manner of such manufactures:	
Check The Items You Wish to Sell (use	a separate sheet of paper, if necessary)	
☐ Accessories (Ladies)	☐ Jackets	
☐ African Artifacts	☐ Jewelry	
☐ Khaki/Safari	☐ Khaki/Safari Shirts	
☐ Apparel (Children/Infants)	☐ Leather Goods	
☐ Apparel (Ladies)	☐ Photos/Pictures/Posters	
☐ Apparel (Men)	☐ Umbrellas	



Military Sorority, Inc.
☐ Art/Prints/Posters
☐ Auto Accessories
☐ Badges/Buttons
☐ Banners/Flags
☐ Bath Accessories
☐ Bath Apparel
☐ Beachwear/Playwear
☐ Books/Literature
☐ Candy/Cookies
☐ Ceramics/Cups/Mugs
☐ Crafts/Quilted Crafts
☐ Desk/Office Accessories
☐ Garment Bags
☐ Glassware
☐ Greek Paraphernalia

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☐ Wooden Artifact	S
☐ Shirts/T-Shirts	
☐ Other	

FOR RENEWALS ONLY

Please List the Item(s) You No Longer Wish to Sell.

(Attach an additional sheet if more space is needed. It is very important that all details or proposed activity by Applicant be disclosed.) This will be reviewed very carefully and shall impact upon licensure decision.

Type or Print this application and return to:
Pi Mu Phi Military Sorority, Inc.
3404 Bradfield Dr
Clarksville, TN 37042
FOR OFFICE USE ONLY
Date Rec'd ______ Payment Rec'd ______
Verified by

Verified by ______Approved: Yes \square or No \square Initial _____