ARTZ FOR THE HARP

PREFERRED VENDOR NETWORK APPLICATION & QUESTIONNAIRE
2026–2027 | Venue & Event Services

5000 Austell Powder Springs Road SW, Suite 313, Austell, GA 30106
artzfortheharp.org

Thank you for your interest in joining our Preferred Vendor Network. We connect venue rental clients with qualified professionals for weddings, celebrations, corporate functions, and private events. Submission does not guarantee approval or placement.

1 | BUSINESS INFORMATION

Business name _____

Owner / primary contact _____

Business address _____

City / State / ZIP _____

Phone _____

Business email _____

Website _____

Social media profiles _____

Business structure: ☐ Sole proprietor ☐ LLC ☐ Corporation ☐ Partnership ☐ Other

Years in business: ☐ Under 1 ☐ 1–2 ☐ 3–5 ☐ 6–10 ☐ Over 10

Registered to conduct business in Georgia? ☐ Yes ☐ No ☐ N/A

2 | SERVICES OFFERED

☐ Catering / food ☐ Bartending / beverages ☐ Event planning / coordination

☐ Event design / decorating ☐ Florals ☐ DJ ☐ Live entertainment

☐ Photography ☐ Videography ☐ Photo booth / 360 booth

☐ Furniture / linen rentals ☐ Balloons ☐ Cakes / desserts

☐ Hair / makeup ☐ Lighting / A/V ☐ Staffing ☐ Security ☐ Other

Describe your services and specialties _____

What distinguishes your business? _____

Service area / counties _____

3 | EXPERIENCE & QUALIFICATIONS

Events served annually: ☐ 1–10 ☐ 11–25 ☐ 26–50 ☐ 51–100 ☐ 100+

Event experience: ☐ Weddings ☐ Corporate ☐ Birthdays / Sweet 16 ☐ Baby showers

☐ Galas / fundraisers ☐ Community events ☐ Other

Largest event served (guest count) _____

Experienced with venue setup, breakdown and access rules? ☐ Yes ☐ No

Training, certifications, awards or relevant experience _____

4 | INSURANCE, LICENSING & COMPLIANCE

General liability insurance? ☐ Yes ☐ No

Insurance carrier _____

Coverage amount _____

Policy expiration date _____

Can provide a Certificate of Insurance (COI)? ☐ Yes ☐ No

Can name AFTH as additional insured when required? ☐ Yes ☐ No ☐ Must confirm

Maintain all applicable permits and licenses? ☐ Yes ☐ No ☐ N/A

Food / alcohol permits, if applicable? ☐ Yes ☐ No ☐ N/A

Staffing: ☐ Employees ☐ Subcontractors ☐ Both ☐ Neither

Workers' compensation coverage as required? ☐ Yes ☐ No ☐ N/A

5 | PRICING & AVAILABILITY

Typical starting price or package range _____

Required deposit amount / percentage _____

Recommended advance booking time _____

Customized packages? ☐ Yes ☐ No Written client contract? ☐ Yes ☐ No

Written cancellation/refund policy? ☐ Yes ☐ No

Available evenings and weekends? ☐ Yes ☐ No ☐ Limited

Offer an AFTH-client rate or package? ☐ Yes ☐ No ☐ Open to discussion

If yes, describe the offer _____

6 | PROFESSIONAL REFERENCES

Reference 1

Name / company / event _____

Phone / email _____

Relationship _____

Reference 2

Name / company / event _____

Phone / email _____

Relationship _____

May AFTH contact these references? ☐ Yes ☐ No

7 | PORTFOLIO & CUSTOMER EXPERIENCE

Portfolio / gallery link _____

Client review link _____

How do you address complaints or service concerns? _____

Removed from a preferred vendor list or contract terminated for performance reasons? ☐ Yes ☐ No

If yes, explanation _____

Unresolved event-service legal, licensing or insurance issues in past three years? ☐ Yes ☐ No

If yes, explanation _____

8 | WORKING WITH ARTZ FOR THE HARP

Why do you want to join AFTH's Preferred Vendor Network? _____

Interested in open houses or networking showcases? ☐ Yes ☐ No ☐ Maybe

Interested in styled shoots or promotional events? ☐ Yes ☐ No ☐ Maybe

Authorize use of approved business photos, name and links in directory? ☐ Yes ☐ No

Agree to follow AFTH venue access, setup, safety and cleanup policies? ☐ Yes ☐ No

9 | SUPPORTING DOCUMENTATION

☐ Business registration / license ☐ Certificate of Insurance

☐ Applicable professional permits ☐ Service menu / pricing

☐ Portfolio / photographs ☐ Client references / reviews

☐ Sample service contract ☐ W-9 if required for direct payments

10 | APPLICANT CERTIFICATION

I certify that the information supplied is accurate to the best of my knowledge. I understand that application does not guarantee approval, bookings, referrals, revenue or exclusivity. AFTH may verify qualifications, request documents, and approve, decline, suspend or remove vendors. Vendors remain independent businesses responsible for their own clients, contracts, taxes, staff, licenses, permits and insurance. Any participation or promotional fees will be disclosed separately in writing.

Applicant name _____

Signature _____

Date _____

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References verified: ☐ Yes ☐ No Insurance: ☐ Yes ☐ No ☐ N/A

Permits verified: ☐ Yes ☐ No ☐ N/A Portfolio reviewed: ☐ Yes ☐ No

Decision: ☐ Approved ☐ Conditional ☐ Declined

Vendor category _____

Review / renewal date _____

Reviewed by _____

Notes _____

Enriching lives, one string at a time.