



# Vendor Registration



Date:

## Contact Information:

Company Name:

Name:

Phone:

Email:

## Type of Business:

Products:

## Is Your Company:

Vendor Insured?  Yes  No

Tent?  Yes  No

Tent weights?  Yes  No

Food Licensed?  Yes  NO

License Number:

Additional Comments:

Submit by Email

[info@YourTampaMarkets.com](mailto:info@YourTampaMarkets.com)

**Submit:** \$30 Handmade and \$40 Non-art per (10x10 space) non-refundable, non-transferable payment upon approval to

Venmo@WendyTAMPA | Cash App: \$WendyTAMPA

Credit Card # \_\_\_\_\_

Code: \_\_\_\_\_ Exp: \_\_\_\_\_ Zip: \_\_\_\_\_

**Circle Event Month:** \_\_\_ Jan 29th \_\_\_ Feb 26th \_\_\_ March 26th \_\_\_ April 30th

\_\_\_\_\_  
Signature