



EXPRESS YOUR WORSHIP CREATIVE ARTS CONFERENCE VENDOR'S CONTRACT

THERE IS SPACE FOR APPROXIMATELY 12 VENDOR TABLES IN OUR VENDOR'S MARKET PLACE. SPACES ARE AVAILABLE TO THE GENERAL PUBLIC. TABLE SELECTION WILL BE ON SITE ON A FIRST COME, FIRST SERVE BASIS.

BUSINESS INFORMATION

Name of Business/Ministry:		
Vendor's Name:		
Contact Name:		
Mailing Address:		
City:	State:	Zip:
Cell Phone:	Work Phone:	
Email:	Website:	

VENDOR'S FEE \$100.00 (INCLUDES 4 DAYS)

LIST **ALL** items, products, services and/ or give a general description of all items, products or services that you intend to sell at the conference.

Please list the name of any other employees or persons responsible for selling items at your table:

IMPORTANT NOTE: *Paulette Rolle-Alesnik, Dare to Dance Ministries, Inc., its representative / agents / volunteers are not responsible for your profit or loss of sale. *Vendor's booth fee \$100.00 for 4 days.*

Vendor's Market Place Guidelines:

Here are the guidelines for participating in the Market Area at the "Express YOUR Worship Creative Arts Conference.

- Vendor's fee must be received no later than October 30th. Payment is due in full.
- An email will be sent to confirm your reservation/space.
- The \$100.00 Vendor's fee includes: 1 table, 1 personal announcement from stage (by you), daily announcements by D2D staff, and access to general sessions. You will be provided with a table in the corridor or hallways of the conference site.
- The Vendor's fee is non refundable and will not be reimbursed if vendor is not satisfied with sales or revenue generated at the conference.
- **There is an additional \$50 cost to attend workshops.** Vendors interested in attending daytime workshops MUST complete a registration form at a discount rate of \$50.00 by October 30th.
- Vendor's booth will be open only during Market Place hours of operation: 7am – 8:30am (daily), 10am – 7:00pm (daily). NO selling during the General **Worship** Services (8:30am – 10:am and 7:00 – 10:00pm). You may open your store before, after and during the workshops. Please respect our hours of operation.
- Vendors are responsible for making changes and manning their own tables.
- Vendors must secure and store all items properly when not in operation, as we have limited security available.
- Paulette Rolle-Alesnik, Dare to Dance Ministries, Inc., its representative / agents / volunteers are not responsible for your profit or loss of sale.
- Vendor must sign Waiver of Liability prior to setting up store in the Market Place.
- Vendors must make checks or money orders payable to: Dare To Dance, Inc. **Please mail to Dare To Dance Ministries, Inc P.O. Box 24492, FL 33623 Attn: Vendor Booth**
- You must agree to these terms in order to participate as a vendor. Payment of vendor's fee and submission of this form indicates that you agree to the terms above.

By signing your indicate that the terms and conditions are understood and agreed upon.

Vendor's Signature: _____ Date: _____

Please Make Checks or Money Orders Payable to Dare To Dance Ministries, Inc or D2D

ENCLOSE PAYMENT AND MAIL TO:

Dare To Dance Ministries, Inc

P.O. Box 24492

Tampa, FL 33623

Note: Returned check fee is \$35+ the amount of the check

***** VENDOR'S DEADLINE IS OCTOBER 30th *****

Dare To Dance Ministries, Inc

Vendor's Release of Liability Form / Wavier of Liability

This is a *WAIVER OF RIGHTS*. Please read carefully before signing. Do not sign agreement unless you fully understand what you are signing.

TO: Dare to Dance Ministries, Inc
P.O. Box 24492 Tampa, FL 33623
813-785-9983

RE: Participants _____
Social Security No. _____ **or DOB:** _____

In Consideration of the Ministries' Agreement to provide venue activities for the above named business / participant(s), I agree to release Dare To Dance, Inc., it's representatives / agents /volunteers, Paulette Rolle-Alesnik, Joseph Alesnik along with his faculty, agents, employees and volunteer workers from any and all liability or responsibility should the aforesaid business /participant become injured or ill during this event regardless of the cause of said illness or injury; and I further waive any rights I might have to bring a lawsuit or claim against the ministry Dare To Dance, Inc., it's representatives / agents / volunteers, Paulette Rolle-Alesnik, Joseph Alesnik, his agents, employees and volunteer workers.

Signature of Participant (s)

Printed Name: _____

Address: _____

Telephone Number (s): _____

Date Signed: _____

Sworn to and subscribed before me this _____ **day of** _____ **A.D. 200** ____

Notary Public
Stamp or Seal

IMPORTANT NOTICE: *Dare To Dance Ministries, Inc will not provide workers for your store/booth. You are entirely responsible for your own table and your products at ALL TIME.*