

VENDOR AGREEMENT Gift A Miracle Holiday Boutique & Charity Event 2017

| I, | | (name/c | company name), |
|--|---|--|--------------------------------------|
| agree to participate as a Vendo | or at the Gift a Miracl | e Holiday Market to | be held at The |
| Wee Burn Country Club, 410 | | • | |
| , , , , , , , , , , , , , , , , , , , | | | |
| Wednesday, November 29th | from noon to 9pm: | | |
| Set up will begin at 8:00am or the Event. I agree to arrive on Wednesday. I agree to take do and at no time before. I agree park in the designated location | time, and be ready for own my booth only af to be cleared from the | r business promptly ter 9:00 pm at the c building no later t | at noon on close of the Event |
| Vendor is responsible for ALI supply carts, hand trucks, doll only supply the reserved table loading or transport of any item | ies, manpower, extendand linens. Wee Burn | sion cords, or lighting is NOT responsible | ng. Wee Burn will |
| I agree to the above terms and | to conduct myself in | a professional, hone | est, and courteous |
| manner on behalf of the integr | | | |
| Signature: | • | • | |
| Signature. | | | |
| Date: | | | |
| Contact Information | | | |
| Company Name: | | | |
| Tax ID#: | | | |
| Contact Name: | | | |
| Website: | | | |
| Email Address: | | | |
| Mailing Address: | | | |
| City: | State: | Zip: | |
| Contact Phone Number | | | |

The Tiny Miracles Foundation 381 Post Road Darien, CT. 06820 203-202-9714 www.ttmf.org

Name of person(s) accompanying principal:



2017 Gift A Miracle Holiday Boutique Vendor Waiver

| I, | (Vendor name), |
|--|---------------------------|
| agree that The Tiny Miracles Foundation nd The Wee Bu | |
| responsible for, and have no liability for, any theft, fire, o | or |
| damage to | (Vendor |
| name) merchandise, such as by weather or natural disaste | er, or any other damaging |
| event while the vendor is participating in Gift A Miracle | on November 29th, 2017. |
| Name | |
| Title | |
| Signature | |
| Date | |