

VENDOR Application 2016



Contact Information

Business Name	
Contact Person	
Street Address	
City ST ZIP Code	
Best Phone	
E-Mail Address	

Business &/or Product Description

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Details

Cedar Valley Retreat Center, 5349 County Rd D, West Bend, WI 53090

FRIDAY, February 26th

SET UP 3:00 pm-4:00 pm

ATTEND BOOTH 4:00 pm-7:00 pm

SATURDAY, February 27th

ATTEND BOOTH 4:30 pm-5:30 pm

CLEAN-UP begins at 5:30 pm

Each vendor will receive a rectangle 6-foot table.

___ MARK HERE if you need an **electrical cord**

___ **\$45 booth registration fee** to: *Wellness Jules, LLC* (check only please) ***DUE by DECEMBER 5th, 2015***

*Once payment and completed application are received, you will receive a confirmation email of your reservation as a vendor. Similar businesses will not be accepted. First come, first serve.

Each vendor has the opportunity **to waive the \$45 fee** by referring the retreat to TWO (2) participants. Once registration and payments are received for the participants, the vendor must contact the organizer with their names. Vendors are welcome to register and will be counted as ONE (1) participant. ***DEADLINE to waive vendor fee is December 5th, 2015 at midnight.***
Organizer: juliannehutchcraft@gmail.com

Expectations/Requirements of all participating vendors:

- Act in a respectful and professional manner at all times
- Only provide the services and treatments agreed upon per contract
- Vendors must provide their own special equipment & accessories
- Return the room/space to a clean and orderly state at the end of usage

MAIL Check & Application to:
Wellness Jules, LLC
2435 Tumbleweed Avenue
West Bend, WI 53095

PRINT Name _____

Signature _____ Date _____