

PURPLE HAT Affair



Name of Contact _____
Name of Organization _____
Mailing Address _____
City, State, Zip _____
Phone _____ Fax _____
E-mail _____
Website _____
I will be providing information on the following topics _____
I will be selling the following types of goods _____
I will give away the following samples/product _____
Company name _____

I understand that submission of the Application for Exhibit Space constitutes agreement to abide by National Council of Negro Women exhibitors guidelines. Including the following;

- My business/organization will bring all materials necessary for tabling excluding table and chairs.
 - My Business/ Organization will properly dispose of any leftover information or products.
- My Business/ Organization understands that National Council of Negro Women-View Park Section is not responsible for any lost or stolen items left at unattended tables.
- Sales, samples & products exchanged is the sole responsibility of the seller, National Council of Negro Women-View Park Section is not liable for any potential negative outcomes.
- The cost for exhibition is non- refundable.

Vendor Fees: \$100

Signature _____ DATE _____

Please send a check or money order made payable to National Council of Negro Women Los Angeles
Mail the Application with full payment
P.O. BOX 561165 Los Angeles, CA 90056
~ or ~
CASH APP: \$NCNWViewPark
Memo: Vendor

Note: There will be no monies taken the day of the event for vendor space.

National Council of Negro Women-View Park Section
Vendor Application
May 13, 2023 -2:00pm-5:00pm
Renaissance Hotel
9620 Airport Blvd
Los Angeles CA 90045

*Deadline for payment and application is **April 29th, 2023** for more information:*
Please contact Stephanie Haynes-1st Vice President-Event Chair 323.428.5862 |
Fashionblyfit22@gmail.com | www.ncnwviewparkla.com