

VENDOR APPLICATION

OUTDOOR COVERED SPOTS

First Name: _____ Last Name: _____

Phone number: _____

Business name: _____

Sales Tax ID REQUIRED (Please also provide a copy)

SALES TAX ID NUMBER: _____

Description of what you sell: _____

E-Mail: _____

Size of space requested:

12x12 (\$50) _____ 12X24 (\$100) _____

If you need additional space please let us know! If you have any questions please email us!

Save and e-mail completed application to **tmt@tradedays.org** or bring in paper copy.

Office Phone: (972) 302-5922 Website: <https://tmt.tradedays.org>

Signature: _____ Date: _____