

VENDOR REGISTRATION

PARTICIPANT INFORMATION				
Last Name	First Name			
Street Address	City		State	Zip Code
Home Phone #	Alternate Phone #			
E-Mail Address				
Registration Deadline is April 30, 2017 ½ vendor fee due by on or before April 30. Balance due July 15, 2017 (if applicable helper fee is due as well) *** Limited amount of vendors***		Registration Cost & Payment Information		
PaJama PraiSe 2017 Details Date: August 11 th & 12 th , 2017 Registration & Check-In: August 11 th , 1:00 p.m. Retreat Location: Lakeview Camp & Conference Center 5128 FM 66 Waxahachie, Texas (972) 923-3811		_____ Vendor Package \$165.00 Helper \$80.00 (one allowed) _____ No Overnight stay \$80.00 Fri/Sat SpaceOnly 4 to room (shared rooms) (includes room, meals, vendor fee) Please note if you would like a t-shirt and a pedicure or massage. Please add additional fee of \$35.00 All vendors are asked to provide a gift certificate or a gift for conference give-away.		
Vendor set-up time will be Friday August 11, 2017 at 1:00 p.m. See attached form as well! All purchases are FINAL . Payments are not refundable for any reason including, but not limited to: failure to use WEW, Inc. registration due to illness, acts of God, travel-related problems, loss of employment and duplicate purchase. All of our materials, both printed and on the web, state that all purchases are non-refundable and cannot be transferred to future events. If you cannot attend the conference this year, you can select someone to give your registration to for the 2017 WEW, Inc. PaJama PraiSe conference only.		SERVICE PROVIDED Check One : <input type="checkbox"/> Massage <input type="checkbox"/> Facials <input type="checkbox"/> Pedicure <input type="checkbox"/> Vendor Table (1) Other _____ <div style="border: 1px solid black; padding: 5px;"> I have discussed service type and/or price with a staff of WEW, Inc. I am aware unless approved by CEO any helper that accompany me will be required to register for the conference. Please initial _____ </div>		

I, as the participant, in consideration of registration, hereby agree to hold free from guilt, and hold harmless of blame and liability, the Women Empowering Women for the Next Generation Ministries, Lakeview Camp, Sponsors, and Volunteers of any liability waiving all rights and claims from or arising out of the use of the leased premises included but not limited to any indoor or outdoor activities. WEW, Lakeview Camp, Sponsors, and Volunteers shall be exempt from any and all liabilities, which could result from any injury or property damage while participating at the recreational facility and or during the use of equipment. I further agree not to file any lawsuit against WEW, Lakeview Camp, Sponsors, and or Volunteers as a result of participation at any time for or on account of any claim for personal injuries, death, or property loss, arising or resulting from the use of such facility, services or equipment on or about the premises.

Signature: _____

Date: _____



PaJama Praise 2017

"Do The Work"

VENDOR REGISTRATION AND AGREEMENT FORM

Company/Ministry Name			
Primary Contact Person			
Title of Display			
Representative(s) in Charge of Display at Conference			
Mailing Address			
City		State	ZIP
Phone Number	Cell Phone Number	Fax Number	
E-mail		Website URL	
Vendor Package: <u>\$165 each</u> Helper <u>\$80.00(one allowed)</u> (cash or certified funds only- <i>includes</i> room, meals, vendor fee) No overnight stay fee \$80.00 <div style="background-color: yellow; text-align: center; padding: 5px;">NOTE: SHARED ROOM</div> Set-up 1 p.m. August 11, 2017			Amount: \$
½ deposit due April 30 and vendor final payment due on July 15, 2017 (non-refundable)			
NO FOOD VENDORS			
ELECTRICAL OUTLET NEEDED ___Yes ___No (Vendors must provide extension cords) MATERIALS TO BE DISPLAYED AT CONFERENCE (Description of products)			
Name of Authorized Representative			Title
Authorized Signature			Date

VENDOR REGISTRATION INFORMATION

Selection Process – Selection of vendor displays will be based on first paid and date of receipt of the completed Vendor Registration and Vendor Agreement Forms.

Rate – The rate per display area is **\$165.00 per vendor and an additional fee of \$80.00 for an assistant (one allowed). These fees are to be paid in cash or certified funds only.** This fee includes room, meals, snacks and vendor fee. **Vendor No overnight stay fee is \$80.00 for Friday and Saturday space.** All exhibit/vendor space fees must be paid prior to July 15, 2017. Each vendor display is provided one table and one chair (other requirements are the responsibility of the vendor). Payment can be mailed or paid online at www.wewinc.org (under donate), and the form must be faxed to **214-375-3673**.

Exhibition Hours – Vendor set-up will take place on Friday August 11, 2017, between 1pm and 5pm. Exhibit breakdown is 2 hour after the event, unless approved on August 12, 2017.

Cancellation Policy – Vendor display fee is non-refundable.

Inquiries – Contact Cynthia Williams, at 214.694.3931 or at info@wewinc.org

VENDOR AGREEMENT

Management Rights:

Management reserves the right to restrict exhibits that become objectionable because of noise, method of operation, materials, or, in general, detracts from the general character of the WEW, Inc. Ministries.

Care of Building and Equipment:

Vendors or their representatives must not injure or deface the walls of the building, the displays, or the equipment of the display. If such damage occurs, the exhibitor is liable to the owner of the property damaged. All materials used in the decoration must be flameproof.

Use of Space:

All demonstrations or other promotional material or activities must be confined to the limits of the exhibit booth.

Security:

The vendor is solely responsible for his/her own exhibit material and should insure against loss or damage. Women Empowering Women for the Next Generation Ministries (dba WEW, Inc.), and/or The Lakeview Camp and Conference Center, is not responsible for such loss or damage. Please secure all items of value. All property of the vendor is understood to remain in his/her care, custody and control in transit to and from, and within the confines of the exhibit area.

Name of Authorized Representative	Title
Authorized Signature	Date

Please return this **Vendor Registration and Agreement Form** to:

**WEW, INC. c/o Cynthia Williams
PO BOX 763758
Dallas, Texas 75376-3758
Fax 214-375-3673**