



# 16<sup>th</sup> Annual Jingle Mingle VENDOR REGISTRATION



Saturday, November 23, 2019 | 10:30 a.m. to 2:30 p.m.  
Saginaw Country Club | 4465 Gratiot Road | Saginaw, Michigan

**Please complete and return with \$25 to reserve your table by  
Thursday, July 11, 2019 (space is limited):**

**This year's proceeds benefit:**

**The Pregnancy Care Center of Saginaw**



Business/Vendor Name (as you would like printed in the event program)

\_\_\_\_\_

Contact Person Name \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

# of tables needed \_\_\_\_\_ # of chairs needed \_\_\_\_\_ # of floor racks you will bring \_\_\_\_\_

Do you need electricity?  Yes  No *Optional - How many SCC lunches will you need?* \_\_\_\_\_  
(Enclose check for # of lunches x \$20)

Short Description of items: \_\_\_\_\_

Special Requests: \_\_\_\_\_  
(e.g., dietary needs, space, etc.)

I will provide a gift to be raffled off to those attending the Jingle Mingle  Yes  No

**I ACKNOWLEDGE AND AGREE TO DONATE 10 PERCENT OF MY SALES AT THE JINGLE MINGLE TO THE BENEFICIARY. I UNDERSTAND MY \$25 RESERVATION FEE WILL BE DEDUCTED FROM THE 10 PERCENT DONATION FEE. IF SALES DO NOT EXCEED \$250, NO ADDITIONAL FUNDS ARE DUE THE DAY OF THE EVENT. I AGREE TO INSPECTION OF RECEIPTS FROM SALES AT THE EVENT IF REQUESTED.**

Signed \_\_\_\_\_ Date \_\_\_\_\_, 2019

*Your signature indicates you acknowledge and agree to the above terms and conditions. Information you provide will be used to determine your location at the Jingle Mingle. The SCMS Alliance has the right to place your booth in the position they deem appropriate based on your information.*

**PLEASE RETURN BY THURSDAY, JULY 11, 2019, TO:**

**Mail:** SCMS-A | 350 St. Andrews Road | Suite 242 | Saginaw, Michigan 48638-5988

**Fax:** 989-790-3640 | **Email:** [keri.benkert@sbcglobal.net](mailto:keri.benkert@sbcglobal.net)

*To be completed by the SCMS-A:*

Table Reservation fee \$25 Date Paid \_\_\_\_\_ Check # \_\_\_\_\_  
(\$25 reservation fee to be deducted from the donation fee of 10% of sales which will be donated to the beneficiary)

350 St. Andrews Road | Suite 242 | Saginaw, Michigan 48638-5988  
Office (989) 790-3590 | Fax (989) 790-3640 | Email [Keri.Benkert@sbcglobal.net](mailto:Keri.Benkert@sbcglobal.net)  
[www.SaginawCountyMS.com](http://www.SaginawCountyMS.com)