

ORANGE COUNTY CHILD CARE ASSOCIATION

**VENDOR REGISTRATION – GENERAL MEETINGS**

The Orange County Child Care Association is pleased to offer you the opportunity of obtaining a table at one of our general meetings. We meet five times a year with meetings in January, March, May, September and November. Tables and space will be available for you to sell supplies, services, and share information with our large number of members. Vendor tables will be accessible before, during and after the meeting to allow for maximum selling time.

With your paid registration fee of $25\* and a small door prize that promotes your business, one table will be provided. If more space or tables are required, an additional fee may apply. Vendor space is limited at each general meeting and on a first come basis only. If you are interested in being a valued part of one of our general meetings, please complete the registration form below. Our Program Chairperson will contact you after they receive your completed registration form.

\* Please note these are non-refundable advertising fees. \*There will be a $30 charge for all returned checks.

Cut along line and return bottom portion with your payment

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**Vendor Registration – General Meetings**

Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please explain what your vendor table will include (selling product, services, etc.):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please check month(s) requested and indicate year.

[ ]  Jan. 20\_\_ [ ]  March 20\_\_ [ ]  May. 20\_\_ [ ]  Sept. 20\_\_ [ ]  Nov. 20\_\_

**Please make your check payable to OCCCA and mail to:**

**OCCCA**

**P.O. Box 26769**

**Santa Ana, CA 92799**

**Attention: Program Chairperson**

**Accounting Use Only**  Batch #:\_\_\_\_\_\_\_\_\_\_ Batch Date:\_\_\_\_\_\_\_\_\_\_\_ Check#\_\_\_\_\_\_\_\_\_\_ Check Amt.\_\_\_\_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interoffice: Forward to Program Chairperson 08/15