

THE MARKET AT BAY AREA LANDSCAPES

VENDOR APPLICATION

Date: _____

VENDOR NAME: _____

BUSINESS ADDRESS: _____

PRODUCTS OFFERED (PLEASE DESCRIBE IN DETAIL AND PROVIDE A PHOTO):

EMAIL: _____

MAILING ADDRESS: _____

STATE SALES TAX PERMIT #: _____

NUMBER OF BOOTHS REQUESTED _____ Electricity yes or no – please circle

Email completed application to: sales@bayareanursery.com

Payment (Checks made payable to BAY AREA LANDSCAPE NURERY) no later

Than 10:00am Friday prior to the event or mail/drop off to 5902 S. Staples St. Corpus Christi TX 78413

I agree to abide by all the rules for The Market at Bay Area Landscape Nursery.

VENDORS SIGNATURE _____ DATE: _____

VENDORS PRINTED NAME: _____

PHONE# _____

After submitting your application and payment, you may assume you are approved for participation. If there is any question about your product qualifying for The Market, we will contact you.