

No Drugs America®

A S S O C I A T I O N, I N C

P.O. Box 3308, VICTORVILLE, CA 92393-3308. 866-495-4044

NON-PROFIT ORGANIZATION CALIFORNIA TAX ID: 33-0899378/ WWW.NODRUGSAMERICA.ORG

VENDOR APPLICATION

EVENT: **No DRUGS AMERICA DAY** EVENT DATE: **MARCH 20, 2010** EVENT TIME: **10 AM - 1 PM**

LOCATION: **HYATT Regency Hotel, 1000 E. P. Ave, Victorville, CA 92311**

Please Print

ORGANIZATION: _____

CONTACT PERSON: _____ TITLE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ FAX NUMBER: _____ EMAIL: _____

TYPE OF SERVICE: _____

Vendors must provide something fun for the kids to do. Please check the option below that you will be providing. Note: All donations are tax deductible.

DOOR PRIZE DONATION (I.E. BICYCLE, TOYS, GAMEBOY ETC.)

Item donating: _____

GAME WITH PRIZES

Please explain your game: _____

FINANCIAL DONATION (MINIMUM \$50)

Amount donating: \$ _____

CONDITIONS OF PARTICIPATION

- You must be completely set-up before event starts at **10 am**. Please do not tear down displays or stop activities until the event has closed at **4 pm**. Your area must be completely clean with all trash removed before you leave the event.
- Vendors are responsible for all items required for set-up (i.e. tables, chairs, pop-ups shade covering. etc.) No loud generators.
- Vendors are responsible for their own handouts, displays, products, signs and etc.
- Vendors are responsible at all times for individual staffing and security of items.
- Vendors may collect information from participants (i.e., phone numbers, addresses and etc.) to be used at a later date.
- Vendors must provide something fun for the kids to do.

TO RESERVE YOUR SPACE, PLEASE MAIL, FAX OR E-MAIL THIS APPLICATION TO:

Frank Kelly, No Drugs America, PO Box 3308 Victorville CA 92393-3308

Email: NODRUGSAMERICA@AOL.COM, Phone: 866.495.4044 or fax to 760.951.4951

I have read and agreed to the conditions of participation:

Signature

Title

Date