



PARTICIPATING VENDOR FORM

- College:** _____ (Name of college)
- Non-profit:** _____ (Name of non-profit)
- For Profit:** _____ (Name of for-profit)

Name of Business: _____

Contact Person: _____

Business Address: _____

Phone: _____ **Fax:** _____

Email: _____

- CSU Universities (FREE)
- Fresno State Programs/Offices/Campus Resource/Student Services (FREE)
- Sororities/Fraternities (FREE)
- Non-profit Organizations \$50 (must provide proof of 501c3)
- Community Colleges \$100
- For Profit Entities \$200

Number of Guest I Plan on Bringing:

- None, I will attend alone.
- 1 additional guest
- 2 additional guests

Guest 1 First and Last Name: _____

Phone Number: _____ Email: _____

Guest 2 First and Last Name: _____

Phone Number: _____ Email: _____

Will you provide a bilingual (English/Spanish) speaker to staff your booth?

- Yes
- No

Gift Basket: We are asking for you/your organization to donate a gift basket that will be given to students/parents as a prize during a drawing for attending workshops and completing a passport.

I will be bringing a gift basket/raffle item to be given during our workshops (Initial)* _____

Expectation of Privacy: A professional photographer and videographer will be on-site during the entire event. Images are intended to be used only for non-commercial, educational, and promotional purposes. If you do not want to be photographed, please inform the photographers and videographers. Should a photo or video appear on our website or social media site and you would like it removed, contact Martina Granados at martinag@csufresno.edu.

I agree to the Expectation of Privacy (Initial)* _____

All Vendors will be provided the following: one 6ft Table, 2 chairs and 2 waters

***Bring your own tablecloth/canopy (Per University policy, canopies must be fire retardant and weighed down using sandbags, water jugs, bricks, etc. Note: Garden stakes are not permitted.)** Exhibitors may start setting up on Saturday, October 22, at 9:00 a.m. Exhibitors must be ready to greet guests at 10:00 a.m. and can start breaking down at 3:00 p.m.

Please submit this completed form to: **Xiomara Ramirez Maciel**, Administrative Assistant at xiomaramaciel11@csufresno.edu; 559.278.2616

Make Check Payable to: Fresno State

Mail payment with copy of this registration form to:

**Fresno State Cashiering Services
5150 N. Maple Ave. M/S JA 58
Fresno, CA 93740-8026**



Cashiering Services Use Only

Dept Code: OSP

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