



7193 Jonesboro Road, Suite 202A
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Vendor Application

Event: _____

Date: _____

Vendor Name: _____

Nature of Business: _____

Address: _____ City _____ ST _____ ZIP _____

Vendor Representative Name _____ Cell # _____

Email: _____

Company State Certified or Business License: ___ Yes ___ No State _____ County _____

How many tables/chairs you need for set up? _____ Tables _____ Chairs

Do you need an electrical outlet? ___ Yes ___ No

Assignment of Property Rights

Vendor agrees that for considerations, acknowledgement in this agreement, vendor will only set up for promotion, no counseling or selling of products. The vendor is not a work made for hire belonging to nonprofit vendor assigns and transfers to nonprofit all rights on the premises. Vendor: This agreement constitutes the entire understanding between the parties. The laws of the state of Georgia shall govern this agreement in the event of any dispute.

Vendor Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE

Accept: ___ Yes ___ No If no, reason _____

Nonprofit Authorized Signature _____

Name and Title _____ Date _____