



NEW VENDOR Application
Applications must be received by September 9, 2013
PLEASE PRINT OR TYPE

NAME: _____

COMPANY NAME: _____

STREET: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP _____

E-MAIL: _____ FAX: _____

WEBSITE ADDRESS: _____

PLEASE PROVIDE INDUSTRY REFERENCES: _____

COMPLETE DESCRIPTION OF PRODUCTS TO BE DISPLAYED. INCLUDE ACTUAL PRODUCT IF APPROPRIATE. **INCLUDE RETURN POSTAGE IF YOU DESIRE PRODUCT TO BE RETURNED. ITEMS NOT RETURNED WILL BE DONATED TO THE PIERCE COUNTY CLOTHING & TEXTILE ADVISORS PROGRAM. ITEMS WILL NOT BE HELD OVER FOR THE NEXT YEAR.** _____

PUBLISHED WORKS (NAME OF WORK, DATE PUBLISHED, PUBLISHER): _____

CLASSES TAUGHT (ATTACH SYLLABUS): _____

PLEASE RETURN SAMPLES—POSTAGE ENCLOSED..

MAIL TO: **SEWING & STITCHERY 2014**
WSU CONFERENCE MANAGEMENT
2606 W Pioneer
PUYALLUP, WA 98371-4998
Phone: (253) 445-4575 Toll free (866)-554-8559 FAX: (253) 445-4633

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FOR OFFICE USE ONLY

Date Form Received: _____

Accepted: _____

Catalog Number: _____

Waitlisted: _____

Category: _____

Rejected: _____