



Helping grieving parents and families rebuild their lives after the death of a child

www.bereavedparentsusa.org

VENDOR APPLICATION FORM

Please complete form and email to: BPUSAGatheringChair@gmail.com

- Space will be granted in the order your vendor registration form is received & approved by BPUSA Gathering Conference Committee.
- Your product/information should be of direct interest to bereaved families, i.e. memorial jewelry, angels, butterflies, literature pertaining to grief and loss, etc.
- Vendors should register for the conference. www.bereavedparentsusa.org
- Fee(s) is payable to BPUSA: \$50 per table January 1-May 31, 2019, \$75 June 1-July 1, 2019 & \$100 July 2-31, 2019. Fee payable within 15 business days after notification of BPUSA Gathering Conference Committee approval.

Business/Organization: _____

Contact Name: _____

Phone: _____

Address: _____

City: _____

State: _____

Zip code: _____

Email address: _____

Website: _____

Do you need electrical access for your table?* Yes No

**Some vendor tables will include electrical outlet access, Requests for electrical outlet access should be made, but we cannot guarantee access.*

Number of people staffing your vendor table: _____

Product Information: (Please provide a brief description about your product. This information may be used to determine vendor space and/or marketing for the conference.)

Signature: _____ Date: _____