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| **VENDOR APPLICATION** |
| Hunting Moon Pow Wow |
| October 17, 18 & 19, 2025 |

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Description of items to be sold:** |  |
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| **Quantity** | **Description** | **Electrical** | **Paid by 10/06** | **Total** |
|  | **20' x 10' Booth w/ (2) 8' Table & (4)**  **Chairs $400.00** | **Yes No \_\_** | **Y\_ \_N\_\_\_** |  |
|  | **12’ X 20’ Booth w/ (2) 8' Table & (4)**  **Chairs $200.00**  **Food vendors must provide a refundable $200 deposit, which will be returned upon completion of cleanup.** | **Yes\_\_No\_\_** | **Y\_\_N\_\_** |  |

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| **Applications with Payments must be postmarked by October 6th, 2025** |

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| Cashier Check, Money Order or Credit Card Only **Attached** Yes \_\_\_ No |
| Payable to: Potawatomi Bingo Casino c/o Hunting Moon **No Personal Checks** |
| Attached Copy of Tribal ID **No Exception Attached** Yes \_\_\_ No  (Must be present at the event) |

Copy of a Valid Wisconsin Sellers Permit

Need one: contact: [www.revenue.wi.gov](http://www.revenue.wi.gov)

1-608-266-2486

Food Vendors Only: Proof of Liability Insurance Required.

(Coverages for the entire event)

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| **We use Sertifi to process credit card payments safely and efficiently.** |
| To pay with a credit card, please email: [lstier@paysbig.com.](mailto:lstier@paysbig.com) |
| **Please provide a contact email address, a description of your payment, and the amount you wish to pay.** |
| You will receive a **Sertifi payment link** sent to your provided email address. |