



Florida Wildlife Hospital
4560 North U. S. Highway 1
Palm Shores, FL 32935
321-254-8843
www.floridawildlifehospital.org

Vendor Agreement Form

Company/Group/Organization Name _____

Contact Name _____ Phone _____

Email _____ Fax _____

Mailing Address _____

Please provide a description of services or items you plan to sell

9th Annual "Hoot in the Park" Fundraiser for the Florida Wildlife Hospital

November 19, 2022 at Wickham Park, Melbourne, FL 10am -2pm

UNDER ROOF 10'x10' vending space – must bring your own table and chairs.

~~\$10 for the first five non-profit organizations with 501(c)3 status and a paid registration~~

\$50 basic rate including additional non-profit organizations

\$200 sponsorship rate- logo will go on marketing materials and one vendor space will be provided

Please set up by 9:30 am and breakdown no earlier than 2pm

For more information please contact events@floridawildlifehospital.org

All items being sold or activities being offered must be approved prior to the event

Please return this form by mail and include your check or pay online at

<http://weblink.donorperfect.com/HOOT>

Please read carefully before signing

I/We the undersigned acknowledge that I/we have been informed of the nature of the above described event, and I/we hereby acknowledge our understanding of any and all risks involved in the above described activity/event, and hereby agree to assume all risk and hazards incidental to the conduct of the above described activity/event, including transportation to and from said described activity/event.

Further, I/we, the undersigned, do hereby release, absolve, indemnify, and agree to hold harmless Florida Wildlife Hospital and Sanctuary, Inc, its agents, employees, volunteers, as well as the organizers and sponsors of the above described event/activity, for any and all damages and injuries caused or incurred as a result of our participation in the above described activity/event.

Date _____ Authorized Signature _____