



**Diocese of Wichita and Mid-America  
Parish Life Conference  
Shreveport Convention Center  
Shreveport, Louisiana  
June 15-18, 2011**

Hosted by St. Nicholas Orthodox Christian Church  
Shreveport, Louisiana 71115  
Phone: 318-797-2226 Fax: 318-797-3828

Web: <http://plc.stnicholasorthodox.com>  
Email: [shreveportplc@gmail.com](mailto:shreveportplc@gmail.com)

**VENDOR APPLICATION FORM**

*Our conference will continue the tradition of allowing display booths and vendors to promote/sell their ministries, Orthodox materials, religious liturgical items, and ethnic items. This year, the display/vendor booth will be categorized and charged the following:*

**Definitions and Fees**

**Minimum Fee is \$16.00 per table (8 ft.)**

1. **Exhibitor** - Displays information sells nothing.

Fee - A one time fee of \$16.00 per 8 ft. table. However, if an exhibitor desires to sell items or actively solicit donations, they will be re-classified as category 2 or 3 (depending on the circumstances), and shall pay the charges set forth below.

2. **Church/Organization Vendor** - Selling for profit (in part or whole)

Fee - A one time fee of \$32.00 per 8 ft. table.

3. **Commercial Vendor** - Selling for profit (in part or whole)

Fee - A one time fee of \$300.00 which includes up to 3 8 ft. tables and a 1/4 page ad in the Souvenir Journal. **(The ad must be camera-ready. No ad is included for applications received after May 16.)**

**Additional Tables:** \$24.00 per table for all 3 display/vendor categories - Check Number needed: \_\_\_\_\_

**Electrical Access:** \$30.00, a one-time set up charge - Check if needed: \_\_\_\_\_

**Phone Access:** \$50.00, a one-time charge, *includes electrical access* - Check if needed: \_\_\_\_\_

**Wi-Fi Access:** \$10 per day, or \$25 for 3 days - Dates needed: \_\_\_\_\_

**Late Fee** - All vendor/exhibitor table requests must be in at least three weeks prior to the conference. After May 16, there will be a 25% penalty fee attached to the per table fee.

**Space and tables are limited** and comes on a first come/first serve basis.

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**Exhibitor/Vendor Registration Information**

Please make checks payable to **St. Nicholas Orthodox Church PLC**

**Please Print**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ @ \_\_\_\_\_

Category # \_\_\_\_\_ Total # of tables needed \_\_\_\_\_ Total Amount Due \_\_\_\_\_

Form of Payment: Check \_\_\_\_\_ Echeck \_\_\_\_\_

Acct# \_\_\_\_\_ Bank Routing \_\_\_\_\_

Credit: Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ AMEX \_\_\_\_\_ Discover \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_