

# Exhibitor Application / Agreement 2006

## Contact Information:

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Business / Organization Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Alt. Phone: (\_\_\_\_\_) \_\_\_\_\_

Fax number: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

## General Information:

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Please list the type of products or information you will be selling or distributing. Attach photos and/or additional pages if needed. If you are selling a product or collecting donations, attach brochures or product flyers to assist us in reviewing your merchandise.

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Please list other events or festivals at which you have been a vendor. List event name & year.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## Order Information:

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\_\_\_\_\_ = Total number of Exhibitor Booths applying for x \$200 each = \$ \_\_\_\_\_

\_\_\_\_\_ = Total number of Event Passes (in addition to your 2 free passes) x \$45 (adult) = \$ \_\_\_\_\_

**TOTAL ENCLOSED FOR "LWP! WORSHIP MUSIC- CONFERENCE + FESTIVAL 2006** \$ \_\_\_\_\_

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St. Monica Catholic Church  
attn: Leading With Passion! 2006  
725 California Ave.  
Santa Monica, CA 90403-4097  
Phone: 310-393-9287 Fax: 310-319-9758 Email: TheMusicMinistry@aol.com  
**KEEP A COPY FOR YOUR RECORDS**

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## Payment Information:

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**Please make checks payable to "St. Monica Catholic Church"**

\*We ask that you clearly write "Leading With Passion!" on the memo section of the check to ensure that your payment is properly accounted for.

Check Number: \_\_\_\_\_ Check Amt \$ \_\_\_\_\_

**OR**

MasterCard       Visa *(please check one)*

Name on Card: \_\_\_\_\_ *(please print clearly)*

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ ID Number: \_\_\_\_\_ *(3 digits found on the backside of your card by the signature)*

Signature of the cardholder: \_\_\_\_\_

## Agreement Finalization:

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Organization Name: \_\_\_\_\_

Name of Applicant *(please print clearly)*: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

**(By signing this form you are agreeing to abide by all the stipulations set forth in this document)**

Mail the signed agreement, completed Booth Display (pdf) and payment to:

**St. Monica Catholic Church**  
**attn: Leading With Passion! 2006 - Exhibitor**  
**725 California Ave.**  
**Santa Monica, CA 90403-4097**

www.WingsMusicMinistry.com  
Phone: 310-393-9287  
Fax: 310-319-9758  
Email: TheMusicMinistry@aol.com

**KEEP A COPY FOR YOUR RECORDS**

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FOR LWP/ USE ONLY

Amount Rec'd: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Date: \_\_\_\_\_

Booth(s) Assigned: \_\_\_\_\_

Authorized Signature \_\_\_\_\_

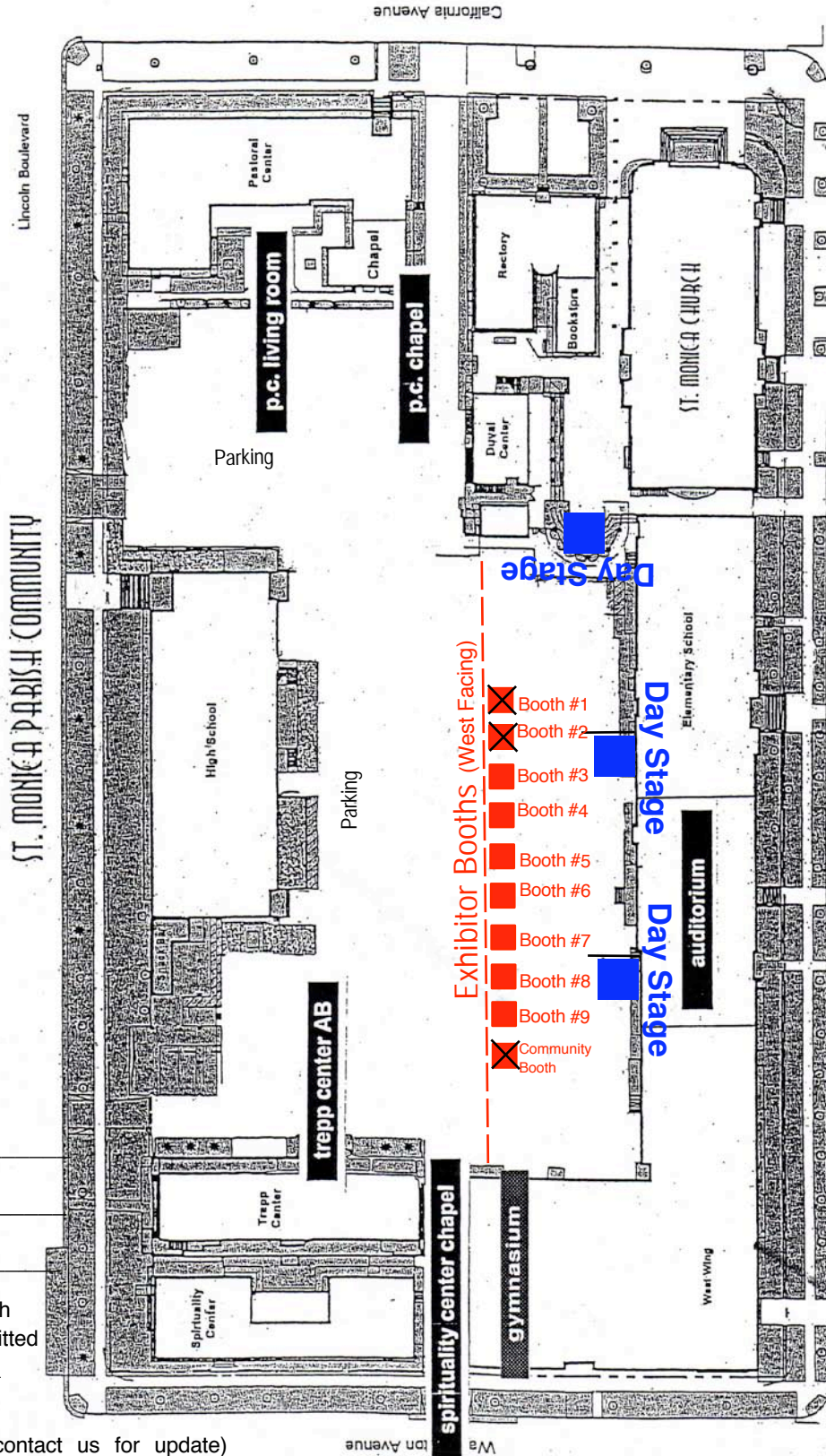
2006

Leading With Passion!  
Worship Music  
Conference + Festival

2006 Leading With Passion! Worship Music Conference + Festival

# Exhibitor/Resource Layout

## Exhibitor/Resource Layout



725 California Avenue ~ Santa Monica, CA 90403 ~ (310) 393-9287

7th Street

Booth Space  
Selections (include  
space # or #'s)

1st Choice \_\_\_\_\_

2nd Choice \_\_\_\_\_

3rd Choice \_\_\_\_\_

\* A copy of this layout with  
selections must be submitted  
with Exhibitor Application

= Not Available (contact us for update)