

Florida Council of Catholic Women, Province of Miami, 26<sup>th</sup> Biennial Conference  
October 24-25-26, 2024

**Florida Council of Catholic Women Vendor Contract**

This Agreement is between the Florida Council of Catholic Women (FCCW) and Vendor

Name of Booth: \_\_\_\_\_

**Official Rules and Regulations for Vendors/Agents**

Florida Council of Catholic Women, Province of Miami, 26<sup>th</sup> Biennial Conference

The Florida Council of Catholic Women, Province of Miami ("FCCW") or Sheraton Tampa Brandon Hotel, 10221 Princess Palm Ave, Tampa, Fl. 33610 **is not responsible for lost, stolen or broken items.**

1. All tables will be manned by the vendor or his/her agent/s.
2. All set-up, tear- down and cleanup will be done by the vendor or his/her agent/s.
3. No materials of a profane nature a will be sold or displayed.
4. No anti-Catholic or anti-Semitic materials will be sold or displayed.
5. The Vendor hereby represents that they have the expertise, knowledge and experience needed to provide the goods or services outlined in this vendor agreement.
6. The vendor agrees to uphold all laws and legal requirements of the state of Florida.
7. The Vendor shall indemnify, defend, and hold the FCCW and its representatives harmless for any loss or damage.
8. Furthermore, the Vendor agrees to hold the FCCW harmless against any loss or damage, save in cases of gross misconduct or negligence by the FCCW or its representatives.
9. All food vendors must provide product Liability Insurance for sale or distribution of any food products at this event. Include a copy of your certificate of insurance with this application.
10. No loose **CONFETTI** or **GLITTER** will be permitted.

I understand that if this contract is in breach that I will be asked to leave the Hotel.

The Florida Council of Catholic Women representative is the sole arbiter of this Contract.

I agree to the above terms. \_\_\_\_\_ Initials

Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Signature (seal) \_\_\_\_\_ Date \_\_\_\_\_

Names of Person/s who will be responsible at the Vendor Table

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

Contact Information (Cell) (\_\_\_\_) \_\_\_\_\_

I will – will not need electricity (circle one)

Thank you for your support.

Check payable to: **Florida Council of Catholic Women**, (please put Vendor in the memo line)

**Mail Reservation Form and Contract by August 1, 2024**

**To: Renie Mas, FCCW Vendor Chairman**

**11632 Taylor Road, Thonotosassa, FL 33592**

[reniedal0@gmail.com](mailto:reniedal0@gmail.com)

When contacting Renie Mas with regards to Vendor questions by email

Please add FCCW Vendor in the subject line.

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The Official Exhibit Space and Rules and Regulations governing conduct of sales held in conjunction with the Conference of the Florida Council of Catholic Women (“FCCW”) at the **Sheraton Tampa Brandon Hotel, 10221 Princess Palm Ave, Tampa, Fl. 33610** is provided in this application. FCCW reserves the right to decline any exhibitor application. Each exhibitor is provided with one 6’ tables with 2 chairs.

	Set up	Hours opened	
Thursday, Oct 24 <sup>th</sup>	12:00 PM	3:00 PM	7:00 PM
Friday, Oct 25 <sup>th</sup>		8:00 AM	7:00 PM
Saturday, Oct 26 <sup>th</sup>		8:00 AM	7:00 PM

Direct All Correspondence to the Vendor Chairman. **Please Do Not Contact the Hotel** Thank You

**Please Print**

Company or Organization: \_\_\_\_\_

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

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

Daytime Phone Number: \_\_\_\_\_ Cell \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name and Description of Business: \_\_\_\_\_

Exhibitor Registration (two people only)

Name \_\_\_\_\_

Name \_\_\_\_\_

If Council Member – Affiliation/Diocese \_\_\_\_\_

Requested Exhibitor Days: Thursday - Friday - Saturday (Please Circle all that apply)

Request for an additional table is \$20.00 for the Conference

1-day Exhibitor \$25.00 Council Member - 1-day Exhibitor \$50.00 Non-Council Member

Full Event Exhibitor \$50.00 Council Member - Full Event Exhibitor \$100.00 Non-Council Member

Electrical outlets are available, but limited. Will you need electric? Yes \_\_\_\_\_ No \_\_\_\_\_

Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_

\*Discounts may apply, please speak with Renie Mas, Vendor Chairman to see if you qualify.

Thank you for supporting the Florida Council of Catholic Women

**Visit us on our website: [FLACCW.org](http://FLACCW.org)**