

VENDOR'S REGISTRATION FORM

Professional Development Office

31 Gough St. #31, San Francisco, CA 94103
tel(415)241-2346, fx(415)241-2371

denied pending approved

Date_____ Event_____

CRN_____ Time_____

Company_____

Street_____

City_____ State_____ Zip_____

Contact Person _____

Title _____

Phone_____ Fax_____ Email _____

Type of Service: Literature Technology Other; specify: _____

Please describe the type of products/services that you offer (please attach your business card)

I'm interested in running a(n): Information Booth; Tables Needed: _____

Workshop; Title: _____

Other; specify: _____

Tech Needs: Internet Connection Outlets_____ Screens/Wall Other: _____

Gifts Donation:

For this event you are: Not required to donate a gift Required to donate a gift for raffle drawing.

Please state gift(s): _____

POLICY:

If organizing an information booth/vendor's table, solicitation is allowed. However, if presenting a workshop/training session, solicitation is prohibited on campus. Lost or stolen equipment and merchandise cannot be claimed against City College of San Francisco. Borrowed or rented equipment and merchandise must be returned in its original state. Otherwise, City College of San Francisco will bill the vendor.

I acknowledge and accept the policy and take full responsibilities for my actions.

Vendor's Signature

Date