



## Vendor Registration Form

Thank you for your interest in participating in the Nashville Cherry Blossom Festival!

|  |                          |
|--|--------------------------|
| Organization / Company Name:   |                          |
| Contact Person:  | Title of Contact Person: |
| Mailing Address:   |                          |
| Telephone Number(s):   | Fax Number:              |
| Email Address:   | Website Address:         |
| What will you or your organization do at Nashville Cherry Blossom Festival?  |                          |
| How would you like your name / your organization's name to appear in the festival program?   |                          |
| Approximately how many members of your organization will be participating at the festival?   |                          |
| Will your organization be selling any items?    Yes    No<br>If so, what?  |                          |
| Does your organization have non-profit, tax-exempt status?    Yes    No  |                          |
| <b>Vendor Fees (Payable to Japan-America Society of Tennessee):</b><br><br>\$150: One 10'x10' tent, one 8' table, two chairs<br>\$50: (Organization will provide their own tent) One 8' table, two chairs<br>\$50: Electricity |                          |
| Will your organization need any of the following?<br>Electrical Outlet (\$50 fee)    Access to Changing Area    Volunteer Assistance<br><br>Other , <b>Please specify:</b>   |                          |
| Will your organization be cooking on site?    Yes    No    Will your organization use propane?    Yes    No  |                          |
| Do you have any other requests / suggestions / questions?  |                          |

Please return this form and fees (payable to JAST): Japan-America Society of Tennessee  
 c/o Emily Winckler, P.O. Box 19046, Nashville, TN 37219  
 Email: ewinckler@jastn.com Phone: (615)879-8727