



MOBILE HEALTH VENDOR

Zo's Family Health & Wellness Groove

Saturday, January 13, 2018 | MLK Weekend

9:30 am to 2:00 pm

North Miami Athletic Stadium | City of North Miami

Dear Potential Exhibitor,

On behalf of the Mourning Family Foundation, we would like to extend an invitation to participate, as an exhibitor, in this year's Zo's Family Health & Wellness Groove presented by Foot Locker and hosted by the City of North Miami.

Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Mobile: () _____ Work: () _____

Email: _____

Website: _____

Twitter Handle: _____ Instagram Handle: _____

EQUIPMENT NEEDS & DISPLAYS (Please check all that apply)

We encourage you to bring a colorful banner and tablecloth that displays your organizations' name, logo or slogan along with promotional items, information, and pamphlets to distribute to attendees. Please note, this event is free to the community, therefore there will be no cash or credit sales allowed on-site

Registration: Services provided/promoted:

Screening (Glucose, Blood Pressure, etc.)

Type(s) of screening: _____

Raffle Drawing Item(s):

(We will be hosting a raffle of various prizes for all attendees & if your organization would like to contribute, please check the box above)

Registration: () Space for Mobile Unit/Dimensions of Unit:

No Call/No Show Policy: I agree to pay a \$250.00 (covers set up fees) one-time fee if I do not show up the day of the event without giving a prior 72-hour notice to Mourning Family Foundation. I understand this event has space limitations and that by signing this form I/we agree to participate or to pay the No Call/No Show fee.

Please return this registration form along with a copy of your Certificate of Insurance (COI) listing the Mourning Family Foundation as an additional insured to the information below no later than Thursday, November 30, 2017.

Print Name: _____

Signature: _____ - _____ Date: _____

Please return this registration form along with a copy of your Certificate of Insurance (COI) to the information below no later than Thursday, November 30, 2017

Email: **events@designsouthflorida.com** and **jmyers@mourningfamilyfoundation.org**

Please place in the subject line: (Attn: ZWG FOOD TRUCK 2018)

CONTACT INFORMATION
TRUCK INFORMATION
AGREEMENT