

**Mirelli Lowcountry Market
VENDOR APPLICATION**

Your Name: _____

Email: _____

Phone: _____

Your Company Name: _____

EIN _____ Do You Have a Business License ____ Yes ____ No

Description of Your Product or Service: _____

Price Range: _____

Do you have ability to take credit cards? _____

Do you have special display needs (ie electricity, wall space, shelves, hooks, clothing racks)

Do You ____ Make ____ Bake ____ Create or ____ Buy Your Products?

What days/times are you wanting to display? _____

Website: _____

Social Media Links:

Facebook _____

Instagram _____

Twitter _____

LinkedIn _____

Pinterest _____

How did you hear about this opportunity? _____

NEXT STEP: Send the information above to MLM@Mirellietc.com. You will receive an email confirmation that your participation is approved. Then go to <http://Mirellietc.com/Mirelli-Lowcountry-Market> and select your preferred days and times and submit your payment.