



# FLORIDA FESTIVALS AND EVENTS ASSOCIATION 2010 EVENT SUPPLIER MEMBERSHIP APPLICATION

PLEASE LET US KNOW THE FFEA MEMBER AND ORGANIZATION THAT REFERRED YOU TO FFEA:

Organization/Business Name: \_\_\_\_\_

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

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

Organization Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Name of First Member: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Name of Second Member: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

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

For additional members, please list names and titles on separate sheet.

Please circle three categories that best fit the services you offer:

- Acts/Entertainment
- Amusements
- Apparel/Promotional Items
- Banners/Flags
- Barricades
- Beer
- Beverages
- Communications
- Consulting
- Cookware
- Decorations/Displays/Parade Supplies
- Economic Impact Studies
- Entertainment
- Entertainment Facility/Festival Venue
- Entertainment/Production Companies
- Entertainment/Talent Agencies
- Equipment Rental
- Event Planners/Producers
- Financial Services
- Fireworks/Laser Shows/Special Effects
- Food/Concessionaires/Catering
- Foundations/Charities
- Fundraising
- Holiday Decorations/Displays/Lighting
- Information & Display Systems
- Insurance
- Marketing
- Marketing/Advertising
- Newclipping Bureau
- Outdoor Movies/Screens
- Production Company
- Recycling Services
- Restrooms
- Sponsorship Sales & Service
- Staging/Lighting
- Ticketing/Wristbands/Credentials/Lanyards
- Tourism/Travel
- Volunteer Management System
- Waste Services
- Website/Internet Services
- Other: \_\_\_\_\_
- \_\_\_\_\_

A brief description of your services (50 words or less): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EVENT SUPPLIER MEMBERSHIP (Effective through December 31, 2009)**

	<b>Dues</b>	<b>No. of Members</b>		<b>Total</b>
• First <u>and</u> Second Member	\$250.00	2	=	\$250.00
• Additional Member(s)	\$100.00 x	_____	=	\$ _____
			<b>TOTAL \$</b>	_____

Enclose a check payable to: FFEA Check No: \_\_\_\_\_

*or*

Charge Card Information (Visa, MasterCard, or American Express)

Name as it appears on card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp \_\_\_\_\_

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

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

Signature: \_\_\_\_\_

Please send to:

Florida Festivals and Events Association, 4174 Palo Verde Drive, Boynton Beach, Florida 33436

*or*

Fax to: 561-736-7188

Questions?

Call 561-736-7071 or e-mail [ffea@bellsouth.net](mailto:ffea@bellsouth.net)