



OFFICE USE ONLY

Ticket #: _____ Booth: _____ Date: _____



DASB FLEA MARKET

21250 Stevens Creek Blvd., Cupertino, CA 95014

(408) 864-8414

www.deanza.edu/fleamarket

DAFleaMarket@fhda.edu

SIX-MONTH CONTRACT

January 2020 – June 2020

PLEASE TYPE OR PRINT CLEARLY AND FILL OUT COMPLETELY

INCOMPLETE OR ILLEGIBLE FORMS MAY NOT BE PROCESSED.

For fees and instructions see the Fees and Registration Procedures Steps page.

RENEWAL (From Oct 1st – Oct 28th 2019) **NEW CONTRACT (From Nov 1st – Nov 27th 2019)**

(Those with an existing current 6-month contract)

RENEWALS received late (after Oct 28th) may be processed as new contracts.

VENDOR INFORMATION — Partners/additional sellers, complete a separate copy of this form

DRIVER LICENSE NUMBER OR STATE ID NUMBER AND STATE *

VENDOR'S NAME

BUSINESS NAME (IF APPLICABLE)

MAILING ADDRESS (street number or P.O. box)

(city, state and zip code)

DAYTIME TELEPHONE NUMBER *

()

E-MAIL ADDRESS

TYPE OF BUSINESS, DESCRIPTION OF ITEMS TO BE SOLD/DISPLAYED

STATUS — Check appropriate boxes, and provide requested information (see Registration Procedure Steps for help)

I hold a valid seller's permit. My number is: **S** _____

No sales of tangible personal property are being made or solicited at this event.

I am not required to hold a seller's permit because:

My retail product sales are not subject to tax
(i.e. Non-Profit)

I sell on behalf of a section 6015 retailer (e.g. Tupperware, Avon) _____

SPACE(S) — List your current space if renewing OR list five (5) choices if this is a new request or a move request. PLEASE NOTE: If you are a renewal AND a move request, we cannot hold your old space for you.

CERTIFICATION

The above statements are certified to be correct to the best knowledge and belief of the undersigned.

I also certify that I will adhere to the Vendor Promise.

VENDOR PROMISE: In order to persuade the Flea Market Operator to allow me entrance and use of a stall any assignees and I promise to read, accept and adhere to the DASB Flea Market Regulations (see "Regulations") available online at www.deanza.edu/fleamarket/regulations.html or available from the office, and which I acknowledge receipt of. I understand and agree that if my assignees or I violate any of these regulations the Flea Market Operator has the absolute right to immediately terminate my status as an approved vendor, eject me from the premises and refuse to allow me to reenter as a vendor. The vendor also agrees to hold the Foothill-De Anza Community College District, its governing board, the individual members thereof, and all district officers, agents, and employees free and harmless from any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of school property.

NAME (typed or printed)

TITLE

SIGNATURE

[Signature]

DATE

* Required to access records. We cannot accept application without this information.

There are no exchanges, rainouts, subletting, or sharing space(s) of this agreement. De Anza may revoke this agreement at any time, and any and all payments may be forfeited.