



Vendor Form

2024 SEFBR Tour of Champions, Okeechobee, FL

Vendor Name: _____ Contact: _____

Address: _____

Phone: _____ Email: _____

Description of Items/Services: _____

Please Check:

- Standard Weekend Vendor \$125**
 Daily Vendor \$75.00

Please circle which show dates:

February 3-4, 2024, April 27-28, 2024, June 1-2, 2024, September 28-29, 2024, November 16-17, 2024

PAYMENT MUST BE MADE IN CASH DAY OF SHOW.

CREDIT CARD PAYMENT:

For Credit Card Payment (Visa, MC, Discover)

Card Number: _____

Exp. Date: ____/____ CVV (3 digit code on back): _____

Mailing Address for Card: _____

Name on Card: _____

Signature: _____ Date: _____

Note: A 4% fee will be added to the total to offset processing fees incurred from our bank.

In submitting my vendor application, I release the show organizer, South East Florida Barrel Racers LLC, all fellow participants, any officer, volunteer, staff member, arena owners, arena operators, and any and all other persons connected with this event from any claim or right for damages which may occur to me, my child (or child for whom I am the legal guardian), my horse, or other property resulting from my attending and participating in this event. Further, I have read and agree to abide by all event rules which have been included with this form.

Authorized Representative Sign & Date

FOR OFFICE USE ONLY:

PAID: Cash: _____ Check: _____ Credit: _____ (4% processing fee)

AMOUNT PAID: _____ **DATE:** _____

BALANCE: _____ **PAID?:** _____