Wildwood Lot Owners Association

Vendor Application

Date:			New:	Renewal:		
	Ve	Vendor Information				
Organization or Individual Nam (specify):	e 					
Organization Address:						
Street	City			State	Zip	
Contact Information:						
Phone:	Name:					
Fax:	Email:					
Cell:	Website:					
Business Information: Number of years in business:	Business Type:			Insurance	Certificate of Insurance: (Please include a copy of your	
Briefly explain what you'll be bringing into the park:	Note: If you	are a vendor bringing firevithin a 50 mile radius of th	vood into ti		n your application.) ust be	
I hearby confirm all above information i knowledge. I further understand that th status and that park entry fees per visit	is application is for p	, ilic.				
APPLICATION FEE REQUIRED: in. Applications are valid for one check.			-			
For MI OA internal use only						
For WLOA internal use only		Application expires:		Rcv'd by	<i>י</i> :	
	ate	Application expires: Fee Rcv'd?:		_ Rcv'd by lor Approved		