

Name (First, MI, Last):		
Name of Business:	Phone:	
Address:		
City:	State:	Zip Code:
E-Mail Address:		
Brief description of goods or services offered for sale:		

Check one box below: **Still need Vendors, to fill out their Membership Forms-online or mailed in.**

Period Sutler: \$10; submit this Sutler/Vendor Application and completed WCWA Membership form and dues for applicant named above.

Period Sutlers sell goods and services pertaining to the Civil War Era. They may make and/or retail items and may sell to anyone.

☐ **Period Tradesman: \$10; submit this Sutler/Vendor Application and completed WCWA Membership form and dues for applicant named above.**

Period Tradesmen make, display, and sell goods and services pertaining to the Civil War. Their area should resemble a workshop rather than a retail store. The number of items on display should be limited. They may sell to anyone.

Period Craftsman: \$0; submit this Sutler/Vendor Application and completed WCWA Membership form and dues for applicant named above.

Period Craftsmen occasionally sell goods pertaining to the Civil War that they make. They may only sell to reenactors when the public is not present.

☐ **Non-Period: Event Coordinators determine cost & form(s) required.**

Non-Period vendors sell goods and services based on any time period, including modern, to anyone.

While engaging in my aforementioned Vendor activities, I **INDEMNIFY AND HOLD HARMLESS** the WCWA from any claims made by participants and spectators while purchasing or using any and all products I may sell or produce. Any Items I sell or produce are my responsibility and I Release, Waive, Discharge and Covenant not to sue the WCWA, the organizers of any WCWA event, the trustees of, officers of, agents of, or members of the WCWA, or the owner or lessor of any property on which the WCWA conducts any activity from all liability to myself, or from any other party claiming an interest through myself, for all loss or damage or demand therefore on account of injury to the person or property due to the purchase or use of any and all products I may sell or produce. Initial: _____

Make checks Payable to WCWA

Signature of Applicant _____ **Date:** _____
Applicant must provide a Certificate of Insurance if applicable.

For WCWA Official Use:

Received by WCWA _____ **Date:** _____

This application must be submitted to the WCWA Treasurer or Membership Coordinator before vendor may participate in any WCWA event. A copy of this Sutler/Vendor Application or Vendor Certificate of Business will be returned to applicant for proof of vendor status. Vendor must conspicuously post a copy of Vendor Application or Certificate or show copy of same upon request.