



Teresa Hardin
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513-549-3630

Subject: Invitation to Exhibit at the Beauty for Ashes Gathering 2024

Dear Valued Vendor,

We hope this letter finds you well. We are thrilled to extend an invitation to you to exhibit at the Beauty for Ashes Gathering 2024, which will be held on **Saturday, April 20, 2024, at the Embassy Suites Blue Ash Hotel, located at 4554 Lake Forest Drive, Cincinnati, Ohio, 45242.**

We believe that your products/services would be an excellent addition to our event, and we would be honored to have you as one of our vendors. The cost for **booth space is \$50.00**, which includes a table with two chairs and white table linen. If you would like to join us for the **luncheon, there will be an additional fee of \$40.00.** Once application is completed and submitted, we will send you the link to the page to pay for your booth and lunch. If you would like to mail your application in with your payment, please make checks/money orders payable to Word Alive Christian Fellowship. Please see further details on the application.

Vendors are welcome to begin setting up as early as 7:30 a.m. The event will conclude around 4:00 p.m., giving you ample time to showcase your offerings to our attendees.

Should you have any questions or require further information, please do not hesitate to contact us at **513-549-3630 or bfacincinnati@gmail.com.** We would be more than happy to assist you in any way we can.

We sincerely hope that you will consider participating in the Beauty for Ashes Gathering 2024 and look forward to the possibility of partnering with you to make this event a success.

Peace and Blessings to you,
Teresa Hardin
Event Coordinator
Beauty for Ashes Women Ministry



****Vendor Agreement Form****

****Event Details:****

Event Name: Beauty for Ashes Gathering 2024

Date: Saturday, April 20, 2024

Venue: Embassy Suites Blue Ash Hotel

Address: 4554 Lake Forest Drive, Cincinnati, Ohio, 45242

****Vendor Information:****

Vendor/Organization Name: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

****Booth Space Reservation:****

Vendor Booth Space Cost: \$50.00

Additional Luncheon Fee (optional): \$40.00

****Booth Space Details:****

- Booth space includes one table, two chairs, and white table linen.
- Vendors may begin setting up at 7:30 a.m. on the event day.
- Event concludes around 4:00 p.m.
- Vendors are responsible for maintaining their booth space and ensuring that it is staffed throughout the event duration.

****Terms and Conditions:****

1. Payment: The vendor agrees to pay the total booth space cost of \$50.00 upon submission of this agreement form. Payment can be made via online by logging onto bfaministry.org or by check made payable to Word Alive Christian Fellowship.

2. Luncheon Fee: If the vendor opts to participate in the luncheon, an additional fee of \$40.00 applies.



3. Cancellation Notice Period:

- Refund Policy: Cancellations made more than 30 days before the event date: full refund of booth space fee. Cancellations made between 15-30 days before the event date: 50% refund of booth space fee. Cancellations made less than 15 days before the event date: No refund provided.
- Exceptional Circumstances**: In certain cases, such as extenuating circumstances or emergencies, the event organizer may consider exceptions to the cancellation policy on a case-by-case basis.

4. Liability: The vendor acknowledges that they are responsible for their own products, displays, and materials. The event organizers and venue shall not be held liable for any loss, damage, or injury incurred during the event.

5. Compliance: The vendor agrees to comply with all event rules and regulations as outlined by the event organizers. Failure to adhere to these guidelines may result in expulsion from the event without refund.

6. Marketing: The vendor grants permission for their organization name and logo to be used in event marketing materials, including but not limited to social media posts, flyers, and website listings.

****Signature:****

I, the undersigned, hereby agree to the terms and conditions outlined in this Vendor Agreement Form and confirm my participation in the Beauty for Ashes Gathering 2024 as a vendor.

[Vendor/Organization Representative Signature] _____

Date: _____