



One Form per Vendor

Name: _____ Title: _____

Tribe/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Tables Vendor is bringing: _____

Email: _____ Do you need an outlet? Yes or No (circle one)

****Vendors need to donate one item from their table for the Raffle as their registration Fee. The item must be valued more than \$50 dollars****

Please check one

Method of Payment: _____ Check _____ Credit _____ Cash \$ _____ Amount

Please make checks payable to:

PNW TERO Region
Lisa Melendez
3002 Duct Cho St
Tacoma, WA 98404

Pay with Credit Card:

Name on card: _____
Card# _____
Expiration(mo./yr.) _____
CVV code: _____
Billing Zip Code: _____

Email or Fax Registration form to:

Fax (253) 680-5997

Lisa.Melendez@puyalluptribe-nsn.gov

“PNW TERO REGION C/o Lisa Melendez” and forward it to

3002 Duct Cho St Tacoma WA 98404.

*** All payments are non-refundable***

Office Use Only:

Payment Received _____ Date Received _____

Type of Vendor: _____