Stellar Business Concepts

1648 Warwick Ave

Warwick, RI, 02889

401-966-6447

**Rhode Island Business Summit:
Launching Your Business on The Rhode of Success**

**B to B Vendor Form**

**Primary Contact Info:**

Client Name: Click or tap here to enter text.

Personal Phone Number:Click or tap here to enter text.

Home Mailing Address:Click or tap here to enter text.

CityClick or tap here to enter text.

State Click or tap here to enter text. Zip

Company NameClick or tap here to enter text.

Type of BusinessClick or tap here to enter text.

Mailing Address: StreetClick or tap here to enter text.

CityClick or tap here to enter text. State: Click or tap here to enter text. ZIP:

Business Phone Number: Click or tap here to enter text.

Email Address: Click or tap here to enter text.

Website Address: Click or tap here to enter text.

Facebook Link: Click or tap here to enter text.

Instagram Link: Click or tap here to enter text.

**Please Choose Your Business Type:**

Services [ ]
Products [ ]
Products and Services [ ]

Product and/or Service Description:

|  |
| --- |
| Click or tap here to enter text. |

Biography (3-4 sentences):

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[ ]  I would like to be considered as a Speaker/Presenter. Time slot is 30 minutes. (We will send you our speaker registration form. This request is due by 5/1/23).
[ ]  I will need a screen/projector for my presentation.
[ ]  I would like to secure advertising space in the event program. [ ]  Half Page $75 [ ]  Full Page $125 (Ad copy due by 9/1/23)
[ ]  I would like my business logo on the stellarbusinessconcepts.com website until the end of the year $50 fee
[ ]  I will need electrical at the event ($25 fee)
[ ]  I will be selling products at the event [ ]  I will not be selling products at the event.
[ ]  I have a Rhode Island State Sales Tax License for my business.
[ ]  I will email a high quality .PNG or .JPEG of my business logo to stellarbusinessconcepts1@yahoo.com for marketing purposes.

$\_\_\_\_\_\_\_\_\_ $200 for exhibitor space includes a 6’ rectangular table
$\_\_\_\_\_\_\_\_\_ Total Added Value Options
$\_\_\_\_\_\_\_\_\_ Grand Total due

Please send payment to Venmo: @StellarConcepts CashApp $StellarConcepts or you can write a business check payable to: Stellar Business Concepts Memo: Exhibitor Space

For credit card payment, please call Erica Saccoccio at (401)996-6447 within three days of signing this agreement.

[ ]  I agree to the following speaker expectations:

|  |
| --- |
| B2B Exhibitor Expectations & Guidelines:➢ Submission does not guarantee inclusion or admittance to the conference. You will be notified by email that your application has been approved.➢ I understand that no exhibit space shall be held or secured without payment in full. There are no refunds/transfers of any fees associated with this agreement. The event does not guarantee attendance for the event. The Event Producer, Stellar Business Concepts, LLC. Reserves the right to cancel this agreement for reasons of non-compliance or other deemed viable. I understand exhibit spaces will be assigned and set up instructions will be issued 2-3 weeks prior to the event and any forthcoming documents must be acknowledged by required deadlines.➢ The deadline for all presentations is May 1st 2023. This will allow for any revisions or feedback from STELLAR BUSINESS CONCEPTS, LLC. Stellar Business Concepts, LLC., reserves the right to revise presentations before, during and after the RI Small Business Summit: Launching Your Business of The Rhode of Success.➢ Exhibitor’s information will be utilized throughout show marketing in print and digital materials.➢ Stellar Business Concepts, LLC., will be recording presentations in audio and/or visual form. Stellar Business Concepts will be the sole copyright owner of the recording and can distribute and use for marketing purposes. By giving consent above, I agree to the terms and understand my person, goods and/or services and marketing materials will be recorded, owned, and distributed by Stellar Business Concepts, LLC. |

For questions, please contact Erica via telephone: 401-996-6447 or via email stellarbusinessconcepts1@yahoo.com

Please complete this registration form and send to stellarbusinessconcepts1@yahoo.com

Authorized Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Contract Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Authorized Agent for) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Business Name) herby authorize Erica Saccoccio on behalf of RI Small Business Summit: Launching Your Business to the Rhode of Success to charge my credit card number.