



THE PAVILIONS AT PENFIELD BEACH

VENDOR FORM

CONTACT NAME: _____

FUNCTION DATE: _____

	<u>COMPANY</u>	<u>CONTACT</u>	<u>PHONE</u>	<u>EMAIL</u>	<u>CERTIFICATE OF INSURANCE</u>
GENERAL LIABILITY INSURANCE					
CATERER					
LIQUOR LIABILITY					
EVENT PLANNER					
FLORIST					
RENTAL COMPANY					
TRANSPORTATION					
DJ/BAND/ ENTERTAINMENT					
PHOTOGRAPHER/ VIDEOGRAPHER					
OTHER					