

# LUV MY NATURAL CURLS

## 2015 SEEDS OF LUV SPONSORSHIP LEVEL APPLICATION



**Event Name: Seeds of Luv  
Natural Hair Workshop**

**Event Date: February 2015 (Date has not been yet determine)**

**Company Name**

\_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Contact Person** \_\_\_\_\_ **Phone** \_\_\_\_\_

**E-mail**

\_\_\_\_\_

**INDICATE Seeds of Luv Sponsorship Level**

**Please circle your selected sponsorship level**

- 1. Seeds of Luv Sponsor(s) of the Year**
- 2. Fruits of Luv Sponsorship Level**

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## 2014 SEEDS OF LUV VENDOR APPLICATION

3. Branching out Sponsorship Level
4. Supporting Trunks Sponsorship Level
5. Rooting For Luv Sponsorship Level

TOTAL PAYMENT ..... \$ \_\_\_\_\_

List the products that will be sold at your booth/table.

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NOTE: Spaces are reserved on a first come first serve basis. **Selected Sponsorship level can only be held once full payment is received or a 50% deposit is made.** (Balance will due on or before September 30 2014) **All cancellations are due by Thursday, November 20 2014. A non-refundable deposit/full amount will apply after Thursday, November 20 2014.** It is understood that this application will become a binding contract upon acceptance by the **2015 Seeds of Luv**, hosting by Luv My Natural Curls. Please circle payment type: Personal check, money order, cashier checks and business checks are accepted. **Part of Proceeds will be donated to a selected non-profit organization (Not yet determine) TAX DEDUCTABLE!**

**(CHECK/MONEY ORDER CAN BE MADE TO LUV MY NATURAL CURLS)**

VISA, MASTER CARD AND AMERICAN EXPRESS.

Name on credit card:

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Amount enclosed: \$ \_\_\_\_\_ Credit card number: \_\_\_\_\_

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Exp. date: \_\_\_\_\_ Signature of credit card owner: \_\_\_\_\_

Three digits security code on back of credit card: \_\_\_\_\_

Please mail payment and application to:

Luv My Natural Curls Boutique: 185 Main Street, Avon, Ma 02322

**Please do not write in the section below. For management use only.**

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Space assigned:

Payment type: \_\_\_\_\_ Check: \_\_\_\_\_ Amount received:

\$ \_\_\_\_\_ Date received: \_\_\_\_\_ Amount due: \_\_\_\_\_

Received/Approved by:

PLEASE FORWARD YOUR LOGO/PICTURE/GRAPHIC/TEXT, ETC. IN ANY OF THE  
FOLLOWING FORMATS:

JPEG FILE

PDF FILE

PRINTED COPY OF AD/BUSINESS CARD

ENCLOSED A CHECK OR MONEY ORDER PAYABLE TO: Luv My Natural Curls

COPY AND MAIL THIS FORM ALONG WITH ALL ATTACHMENTS AND YOUR  
PAYMENT TO: Luv My Natural Curls, 185 Main Street, Avon, MA 02322

### Social Media Profile

**Facebook:** \_\_\_\_\_

**Twitter:** \_\_\_\_\_

**Hash-tags:** \_\_\_\_\_

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## 2014 SEEDS OF LUV VENDOR APPLICATION

**Thank you and we look forward to working with you on 2014 Seeds of Luv project!**

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