

ACA SCHOLOARSHIP RODEO VENDER APPLICATION

Applications due May 9

Name of Company/Firm (as shown on Federal Tax return):				
		,		
Alternate name, if applicable (doing business as)				
Mailing address	City		State	Zip Code
Contact Person		Phone		
Email Address Web Site				
Will you Accept Checks: () Yes ()	No Purchas	ing Card (i.e. V	/ISA): () `	Yes or () No
I agree to the \$35 vendor fee and I a reporting proper sales taxes.	gree that it is	my responsib	ility for ch	arging and
Signature		Date		

P.O. Box 1081*13347 West Main *Larose, LA 70373*985-693-7109