

19th ANNUAL COMMUNITY DAY 2014

Saturday, January 18, 2014 – 8:00 a.m. – 3:00 p.m.

Venue Location: 1430 West Manchester Avenue – Los Angeles, CA 90047

Set Up Time: Friday, January 17, 2014 any time after 10:00PM - Until
Saturday, January 18, 2014 during the hours of 4:00AM – 7:00AM

Homebuyers, Banking & Finance • Job Fair Community Resources • Health Forum • Literacy Awareness Youth Empowerment • Camp-Can-Do

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Fax _____ E-mail _____

Organization / Agency Name _____

Contact Person _____

**PLEASE CHECK YOUR AREA OF INTEREST: HOMEBUYERS/BANKING [] JOB FAIR []
COMMUNITY RESOURCES [] HEALTH FORUM [] LITERACY AWARENESS []
YOUTH EMPOWERMENT [] CAMP-CAN-DO []**

This includes 1 six foot table and 2 chairs

PLEASE CHECK ONE

Method of Payment: Cash [] Check [] Money Order [] Credit Card []
Please make Checks or Money Orders payable to: H.O.P.E. for Life Foundation

DONATION	\$ _____
Non-Refundable Clean Up-Fee	\$ 20.00
Electricity Fee	\$ 35.00 <i>optional</i>
Canopy Fee (size 10'x10')	\$ 65.00 <i>optional</i>
TOTAL	\$ _____

CREDIT CARD INFORMATION

Credit Card #: _____ Expiration Date: _____
Address _____ City _____ State _____ Zip Code _____
Name on Credit Card _____ Signature _____

Waiver: I release the Sheriff's Multi-Faith Clergy Council, Power of Love Christian Fellowship, H.O.P.E. for Life Foundation, its agents and affiliates from any liability that may be encountered on Community Day or Multi-Faith Prayer Breakfast 2011. I (We) accept full responsibility.

Signature _____ Date _____

Community Day Headquarters
1426 West Manchester Avenue, Suite A
Los Angeles, CA 90047

OFFICE: (323) 753-4673
Email: hope4life_90047@yahoo.com

Fax: (323) 778-4673

Please Visit Our Website at: www.communityday.net

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***Security • Set-up & Breakdown • Witnessing
Volunteers • Transportation • Dialogue of Change
Photographer/Videographer • Information Booth
Clothing Distribution • Food Distribution***

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Fax _____ E-mail _____

Organization / Agency Name _____

Contact Person _____

PLEASE CHECK YOUR AREA OF INTEREST:

SECURITY [] TRANSPORTATION [] SET-UP & BREAKDOWN [] WITNESSING []

DIALOGUE OF CHANGE [] PHOTOGRAPHER [] VIDEOGRAPHER []

FOOD DISTRIBUTION [] CLOTHING DISTRIBUTION [] INFORMATION BOOTH

I will be available to volunteer _____ (dates) before the event,

_____ (hours) Friday Evening, _____ (hours) Saturday

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International Business Expo Vendor Application

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Fax _____ E-mail _____

Product/Service _____

Contact Person _____

Check one below √	Type of Business	Paid BEFORE 12/15/2013	Paid AFTER 12/15/2013
	Small Business	\$200.00	\$300.00
	Corporation	\$500.00	\$700.00

Booth rental fee includes 1 (one) six-foot table and 2 chairs

PLEASE CHECK ONE:

Method of Payment: Cash Check Money Order Credit Card

Please make Checks or Money Orders payable to: H.O.P.E. for Life Foundation

DONATION \$ _____
Booth Rental Fee (see above) \$ _____
Non-Refundable Clean Up-Fee \$ 25.00
Electricity Fee \$ 35.00 *optional*
Canopy Fee (size 10'x10') \$ 65.00 *optional*
TOTAL \$ _____

NOTE to Food Vendors: There Is An Additional Charge from the County of Los Angeles. Health Permit Fees made payable to: Los Angeles County. Fees paid with money order or cashier's check only. Please contact office for application and details.

CREDIT CARD INFORMATION

Credit Card #: _____ Expiration Date: _____

3 digit code on back of Credit Card: _____

Address _____ City _____ State _____ Zip Code _____

Name on Credit Card _____ Signature _____

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Signature _____ Date _____

Community Day Headquarters

1430 West Manchester Avenue · Los Angeles, CA 90047

Direct Contact: (323) 753-4673 or (323) 839-9399 · Fax: (323) 778-4673 or (323) 231-0012

Email: hope4life_90047@yahoo.com • Website: www.communityday.net