VENDOR TABLE RESERVATION REQUEST
DEPARTMENT OF MICHIGAN VETERANS OF FOREIGN WARS
2027 MID-WINTER CONFERENCE
Kalamazoo Radisson Plaza Hotel

FORM MUST BE COMPLETED FOR ALL TABLE REQUESTS

Requesting for:

_____ 2027 Mid-Winter Conference Vendor Room January 23 and 24 - $60/Table

Name_____

Committee/Organization_____

Email_____

Phone Number_____

Tables Requested _____ 1 Table _____ 2 Tables (check one) Total $_____

Based on room space, we will do our best to accommodate your request

Payment is not required for current standing VFW Department committees. All other vendors must complete information below to reserve a table(s)

Complete information below and fax to 517-485-6432 or email to Jan: bookkeeper@vfwmi.vet or Amanda: amanda@vfwmi.vet

_____
Name on Credit Card

_____ _____/_____
Credit Card # Expiration Date

_____
Card Security Code Zip Code of Card Holder

_____ _____
Phone Number Email for Receipt

Rev 11/3/26