

\_\_\_\_\_  
Name

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

**Check List**

Will Need For Event from VSABA

- Flyers/Brochures of Membership Benefits
- Banner or Poster of VSABA
- New Membership Application Forms
- VSABA Member/Volunteer Representative

Event Information

Date of Event \_\_\_\_\_

Name of Event \_\_\_\_\_

Location (City, ST) \_\_\_\_\_

Type of Event \_\_\_\_\_

Complete List of Materials at Event if required or necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*All events submission forms must be submitted at least two (2) weeks in advance of the event.**

By submitting this Event Submission Form, I affirm that I acknowledge that I am responsible to comply with VSABA guidelines. I also agree that the facts set forth in this form are true and complete and I have provided the necessary documentation. I understand that if my submission is denied I will not be permitted to participate in representing Valley Springs Area Business Association at this event.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

For Compliance Use Only

- Flyer/Brochures Provided
- Banner or Poster Provided
- Member Apps Provided
- Member/Volunteer Provided
- Added to Event Calendar

Date Received \_\_\_\_\_

Date Approved \_\_\_\_\_

Social Media Approval \_\_\_\_\_

Marketing Department Approval \_\_\_\_\_