



# Givers Gathering Co-Op Event Host Application



## YOUR CONTACT INFORMATION

First Name  Last Name

Address

City/State  Zipcode

Phone  Email

## YOUR EVENT

What type of event are you hosting?

Retreat       Festival      Other

How many spots are available for this Event?

1-5       5-10      Other (list number)


## EVENT OPTIONS

What will be included at this event?

<input type="checkbox"/> Food	<input type="checkbox"/> Classes
<input type="checkbox"/> Music	<input type="checkbox"/> Yoga/Movement
<input type="checkbox"/> Workshops/Seminars	<input type="checkbox"/> Market/Vendors
<input type="checkbox"/> Networking	<input type="checkbox"/> Others, _____

Is there a financial exchange for this event?  No       Yes

Please share any other relevant information you would like included in your listing (duration/date of event, relevant details, etc) + preferred method for applicants to contact you

*I hereby agree to allow my preferred contact information to be shared on the Givers Gathering Co-Op* 

Signature \_\_\_\_\_

*\*listings may be removed at any time by request of the applicant\**