

REGISTRATION FORM  
please print and use dark ink

VENDOR



FULL NAME: .....

MAILING ADDRESS: .....

.....

EMAIL ADDRESS: .....

VENDOR FEES	\$	#	TOTAL
BOOTH (Saturday-Sunday)	\$50 X	..... =	.....
Assit. PASSES (Saturday-Sunday)	\$10 X	..... =	.....
add CULCHA PASS (Patron Saturday-Sunday)	\$30 X	..... =	.....
add DAY PASS (Patron Saturday or Sunday)	\$25 X	..... =	.....

**TOTAL COST \$** .....

Passes available at entrance GATE pending availability  
Personal check or money order ONLY!

List Person(s) for which a Pass is Being Purchased:

Name: .....

Email: .....

Name: .....

Email: .....

List what you will be vending::

.....

.....

**TYPE of CAMPING:** (circle) TENT    RV

**HOW MANY VEHICLES:** .....

**SEND TO:**  
Cognitive RISE Productions  
POB 126095, San Diego, CA 92112

UPON RECEIPT OF REGISTRATION AND KIND PAYMENT  
YOU WILL RECEIVE VENDOR SURVIVAL GUIDE