



PITTSBURGH
DOWNTOWN
PARTNERSHIP

Application for Vendor Membership

Company (Operating) Name _____

Primary Contact Name and Title _____

Use back of page to list alternate contacts, their titles, email addresses and phone numbers.

How would you like your company to be listed in our membership/promotional materials?

Mailing Address _____

City, State, Zip _____

Primary Contact Telephone: _____ Fax: _____

Primary Contact Email: _____

The membership fee for a Downtown Vendor is \$100, and must be renewed annually for the duration of an active vendor permit. Please select your form of payment:

Check enclosed, made payable to Pittsburgh Downtown Partnership, and mailed to:
Pittsburgh Downtown Partnership
925 Liberty Avenue, 4th floor
Pittsburgh, PA 15222.

Credit Card: Visa MasterCard American Express

If you are paying by credit card, you may complete and mail this form to the address listed above, call us at 412-566-4190 with the information, or fax this completed form to 412-566-4193.

Card Number _____

Name on the Card _____ Expiration Date _____

Credit Card Billing Street Address _____

City, State and Zip _____

All of the above information is required to complete a credit card transaction.

Signature _____

Thank you for supporting the Pittsburgh Downtown Partnership!