



Vendor Registration Form

Anyone interested in doing business with St. Petersburg College is requested to complete the Vendor Registration Form. The completed vendor registration is not a guarantee of an opportunity to bid, but will help us in evaluating your business for future opportunities.

Business Name:	
Mailing Address (Street/P.O. box):	
City: _____	State: _____ County: _____ Zip Code: _____
Contact Person:	Title:
Telephone #:	Fax #:
Email Address:	
Is your company certified by the State of Florida's Office of Supplier Diversity as a Minority/Woman owned business? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify certification:	
Please forward a current catalog or provide a website address if catalog is available online. Website Address:	
Type of business/service offered:	
Please return the completed Vendor Registration Form to: St. Petersburg College Purchasing Department P.O. Box 13489 St. Petersburg, FL 33733-3489 OR - <u>Email To:</u> SPCPurchasing@spcollege.edu	

We thank you for your interest in St. Petersburg College.