



POP-UP FITNESS APPLICATION

Complete & Send to:
thefitlifeexpo@gmail.com

Business Name:

Business Address:

Contact Name:

Contact Email:

Is Your Business Registered as a Vendor? Yes No

What type of work out will your gym lead?

Are you willing to promote the class to your members? Yes No

Will you bring equipment? Yes No

If so, what type of equipment?

Do you need help setting up? Yes No

Contact Signature / Date Submitted
