



Tuba City Native Language Program Association dba TCNLPA

Address: P.O. Box 22 Tuba City, Arizona 86045-0022 ♦ Phone: (928) 637-4246
Email: tcnlpa.az@gmail.com ♦ website: www.tcnlpa.org

TCNLPA New Vendor Form

Tuba City Native Language Program Association shall require this form to be completed and submitted to TCNLPA along with IRS W9 Form before any type of payment is issued to you as required by IRS Regulations. Parents or Guardian of a student that is considered a minor under the age of 18 shall be issued the check in their name therefore the Parent or Guardian shall submit for their child.

New Vendor Information	
Company Name: _____	
Individual Name: _____	Contact Method: <input type="checkbox"/> Call <input type="checkbox"/> Email <input type="checkbox"/> Text Message
Finance Office Contact Person: _____	Phone: _____
Email Address: _____	Contact Phone: _____
Physical Address: _____	
Mailing Address: _____	
I received my mail by: <input type="checkbox"/> USPS Physical Address Mail Delivery <input type="checkbox"/> USPS Post Office Mail	
Website: _____	
Are you associated with Tuba City Unified School District? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes: <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Student <input type="checkbox"/> School District Employee <input type="checkbox"/> Other: _____	
<input type="checkbox"/> Check if on behalf of Minor: Minors' Name: _____ Age: _____	
<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____	
Federal Tax ID: _____	
Remittance (Payable to) Information	
Payable to (Name or Company) _____	
Mailing Address as shown on Individual's State ID or Driver's License - Check will mailed on indicated above	
Required Questionnaires	
Provide a Description of the type of goods or services you will be providing TCNLPA? _____ _____ _____	
Do you have an agreement with any cooperative purchasing agencies? If so, please provide contact number and contact information of the agencies: _____ _____	
Tuba City Native Language Program Association is a non-profit 501 (c) 3 association that is registered with the Arizona Corporation Commission as a Domestic Non-Profit Entity within the State of Arizona, therefore follows Arizona's State Laws.	
Information provided by: _____	Signature: _____
Title: _____	Date: _____