



2025 Vendor Application

E. Shoshone & N. Arapaho Tribes Tribal Employment Rights Office- TERO
P.O. Box 460 Fort Washakie, WY 82514
(307) 332-9093/(307) 332-7618 Office

Business Name: _____

Circle One: Indian Owned Non-Indian Owned

Description and Location of Business (food, merchandise, etc.):

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell phone: _____

Fax: _____ Email: _____

Resolution No. 2008-988 states any business not submitting a completed Vendor Permit Application may be denied the right to conduct or continue conducting business on the Wind River Reservation.

The Vendor Permit Application must be approved by TERO before conducting business on the Reservation.

Contact Person (Please print) _____

Date: _____

Company's Authorized Representative's Signature

Date: _____

TERO Director/Representative

Approval: Yes: _____ No: _____