EXHIBITOR APPLICATION
Due: February 1, 2020

Saturday and Sunday March 28th & 29th, 2020

COMPANY NAME: ____________________________________ EMAIL: _________________________________
ADDRESS: ____________________ CITY: ____________________ STATE: _______ ZIP: ________________
PHONE: ____________________ CELL: ____________________ FAX: _______________________________

ON SITE REPRESENTATIVE NAME ________________________________
CELL: ________________________________ EMAIL: ________________________________
CA SELLERS PERMIT: ________________________________ CONTRACTORS # ________________________

LIST ALL PRODUCTS: Exhibitors will be limited to the listed products and/or services. Please use additional space if necessary. Be specific.

COMMERCIAL EXHIBITORS: See below.

Space Location: Number in order of preference: ___ H.W. Hunter ___ Van Dam ___ Outdoor
Space Size:
☐ 10’x10’ Inline $525  ☐ 10’x10’ Corner $625  ☐ 10’x20’ Inline $1,050  ☐ 10’x20’ Corner $1,250
☐ 10’x30’ Inline $1,575  ☐ 10’ x30’ Corner $1,675  ☐ Other, Please Specify: __________

Insurance Requirements: Each contractor must provide AV Fair & Event Center with proof of general liability insurance for no less than $1,000,000.00. Please see attached insurance requirements; You may purchase insurance through us for $22.00.

Electric: ☐ YES _____ # Amps  ☐ NO (Electric needs must be finalized two weeks prior to the event.
☐ Giveaways
You MAY NOT hand out any food items such as popcorn, gum, unwrapped foods, etc. or water.
☐ Presentation/Seminar Topic:

Note: Price includes for Commercial: one eight-foot draped backdrop, two draped side rails, one eight-foot table, two folding chairs, and electricity. NO CANOPIES/ROOFS ON FRAMES OR WALLS, NO EXCEPTIONS.

ATTENTION: Spaces are limited. This is an application only, not a contract. Contracts will be granted on a first come first serve basis. Management reserves the right to accept or deny any application.

Authorized Signature ____________________________ Printed Name ____________________________
Title ____________________________ Date ____________________________

RETURN APPLICATION TO: Mike Shuck - mike@avfair.com or fax: (661) 942-2135