

MOUNTAIN AIRE PROMOTIONS EXHIBITOR FORM

EXHIBITOR INFORMATION

Name: _____ Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Goods/Services Description: _____

EVENT DETAILS

Show Location: **McClellan Conference Center** Date: **Jan. 13/14 2018**

| <u>Space Pricing</u> | | <u>Requested Space Size</u> | |
|---|---|----------------------------------|-------|
| Tables (6ft) \$100/Ea. (5+ 10% Discount) 1 Vendor Badge Per Table | Booths (Includes 2 Tables) \$300/10x10 (10x20+ 10% Discount) 3 Vendor Badges Per 10x10 | _____ _____ | |
| Payment Type: <input type="checkbox"/> Check <input type="checkbox"/> Card <input type="checkbox"/> Cash | | Price: | _____ |
| <u>Card Information:</u> _____ - _____ - _____ - _____ Exp. ____ / ____ Code _____ Zip: _____ | | Deposit: (50% Minimum) | _____ |
| | | Balance: | _____ |

Exhibitor: _____ Date: _____