



APPLICATION AND CONTRACT FOR EXHIBIT SPACE
2017 HOME, LIFESTYLE & SPORT SHOW
The Lodge of Four Seasons
Friday, October 13, 2017 from 4:00 - 9:00 PM
Saturday, October 14, 2017 from 9:00 AM - 5:00 PM

Business: _____ Chamber Member: YES or NO (please circle one)
 Address: _____ City: _____ State: _____ Zip: _____
 Contact Person: _____ Phone: _____ Fax: _____
 Email: _____ Sell Merchandise at show? Yes or NO (please circle one)
 If **YES**, MO Sales Tax #: _____ Categories: Home Lifestyle Sport (circle category)
 Product/Service to be exhibited: _____

<u>Size of Booths & Quantity</u>	<u>Member Rate</u>	<u>Non Member Rate</u>
_____ 8 X 10 Standard Booth	\$375.00	\$515.00
_____ 8 X 10 End Aisle Booth	\$425.00	\$565.00
_____ 8 X 10 Double Standard Booth	\$685.00	\$890.00
_____ 8 X 10 Double End Aisle Booth	\$735.00	\$940.00
_____ 8 x 10 Four Standard Booths	\$1230.00	\$1815.00
_____ 8 x 10 Four End Aisle Booths	\$1280.00	\$1865.00
_____ 30 x 60 Outdoor Space <i>(includes standard indoor 8X10 booth)</i>	\$1280.00	\$1865.00
_____ <i>*Additional outdoor space available for \$100 per 10 feet!</i>		

Booth Location: Please refer to the floor plan to select your preferred space. *Space is assigned on a first-come, first served basis upon receipt of full payment.*

First Choice: _____ Second Choice: _____ Third Choice: _____

_____ **Amount Enclosed (Space assigned based on receipt of full payment)**

_____ **Insurance** **Certificate of Insurance Enclosed** **Certificate will be sent separately**

Set-Up Dates and Times

Thursday, October 12, 2017– 6:00 - 9:00 PM ● Friday, October 13, 2017–6:00 AM—3:00 PM

Applications will be accepted as long as space is available. No early breakdowns. **All Exhibitors will be held liable for any damages reported to the Lodge of Four Seasons. If you have a heavy display, please bring plywood sheets to set beneath your display to protect the floor/carpet.

I have read the attached Show Guidelines and the terms of this application and agree they shall be part of this contract. This contract is valid when signed by Exhibitor, and accepted by the Lake Area Chamber of Commerce.

 Authorized Signature Title Date

Please sign and return this form with a check payable to the **Lake Area Chamber of Commerce**, P.O. Box 1570, Lake Ozark, MO 65049 or fax to (573) 964-1010: Discover, Mastercard & Visa accepted. You will receive written confirmation of booth space via email or fax. Applications will be accepted as long as space is available. If you have questions or need more information call the Lake Area Chamber of Commerce (573)964-1008 or email chelsea@lakeareachamber.com.

Office Use Only: Date Received: _____ Amount Received: _____ Payment Method: _____