



**THE 2011 WESTERN FAIR-September 9th to 18th
PROGRESS BUILDING - Application Form**

COMPANY NAME: _____
 ADDRESS: _____ CITY: _____ POSTAL: _____
 CONTACT: _____ EMAIL: _____ WEBSITE: _____
 PHONE: _____ CELL: _____ FAX: _____

PRODUCT/SERVICE DESCRIPTION: Please provide a complete description of the product or service you wish to sell. Please note only those items described in the official contract are allowed to be sold or displayed in the exhibit.

PRICING: Rates Include: 1-Unit of Hydro (110V 15amp)/10 x 10, A Complement of Admission Tickets, Booth Drapery

Exhibitor () Yes	Vendor (Cash n/Carry Sales) () Yes
1 – 2 booths = \$772.00 per 10 x 10	1 – 2 booths = \$1080.00 per 10 x 10
3 – 5 booths = \$695.00 per 10 x 10	3 – 5 booths = \$1025.00 per 10 x 10
Corner is Additional: \$71.00 per corner	

# of 10 x 10 Booths: _____ x \$ _____ = \$ _____	SUB TOTAL = \$ _____
# of Corners: _____ x \$71.00 = \$ _____	Plus 13% HST = \$ _____
	Total Rental Cost = \$ _____
Authorized Signature: _____	Date: _____

DEPOSIT:

Forward a deposit of **50% of booth rental.** A \$25 fee will be applied for all NSF cheques

VISA AMEX MASTERCARD CHEQUE ENCLOSED (Please make payable to **Western Fair Association**)

Card #: _____ Expiry Date: ____/____/____ Validation Code on back: _____
 MM / YYYY

Name on Card: _____

Signature of Card Holder: _____

Bank Transfer: Please contact Sari Brady for banking information at 519/438-7203 ext. 228

Deposits are non-refundable for any reason if application is cancelled within 60 days prior to September 6, 2011. Applications received without the required deposit, will NOT be processed. Receipt of application does not guarantee availability of space. If no space is available, deposit will be returned. Booth locations are subject to change at the discretion of show management.

For Office Use Only:			
Date App Received: ____/____/____	Contract # _____	# of N/C Badges: _____	# of N/C Units: _____
Exhibitor () Vendor () Booth #: _____		Booth Size _____	
Contract Price:\$ _____	Less Deposit Received:(\$ _____)	Balance Due: \$ _____	
Date Received: _____		Receipt # _____	