

2019 EXHIBITOR APPLICATION FORM

COMPANY NAME:					
CONTACT NAME:					
ADDRESS:					
CITY / PROVINCE:					
BOWMANVILLE EMAIL:					
WEBS					
LOCATION OF EVENT: Garnet B. Rickard Recreation Complex - 2440 Durham Regional Hwy 2, Bowmanville, ON					
TABLE SIZE: 6'FT			QUANTITY:	CHECK IF REQ	UIRED:
PAY BY OCT 1	\$50.00+HST	\$56.50		HYDRO	YES
PAY BY NOV 1	\$60.00+HST	\$67.80		CORNER	YES
PAY AFTER NOV 1	\$70.00+HST	\$79.50		CORNER	YES
We have read and acknowledge vendors liability insurance terms* Please see website for details* TOTAL SUBMITTED:				WALL	ILS
EXHIBITOR SIGNATURE: *Electronic "email" signatures to this Agreement are acceptable and carry with it the same full force and effect as an original signature.					
*Electronic "email" signatures to thi	s Agreement are accept	DATE:		ana ettect as an origino	aı sıgnature.

* SET-UP TIME: 8AM - 10AM / EVENT TIME: 10AM - 4PM

To confirm a reservation, this application must be accompanied with FULL PAYMENT.
 All payments are NON-REFUNDABLE and NON-TRANSFERRABLE.

- Please make all payments via E-Money Transfer to popculturecan@gmail.com

* NO ADULT MATERIAL CAN BE DISPLAYED OR SOLD

- PayPal accepted (\$5.00 flat rate service fee will apply)

- The price of space includes 1 table and 1 chair.





PayPal

e-Transfer

