



DATE: **SATURDAY, MAY 20TH, 2023**

2023 EXHIBITOR APPLICATION FORM

COMPANY NAME: _____

CONTACT NAME: _____

ADDRESS: _____

CITY / PROVINCE: _____

**PORT PERRY
COMICON!**

PHONE: _____

EMAIL: _____

WEBSITE: _____

LOCATION OF EVENT: *The Scugog Community Recreation Centre - 1655 Reach St, Port Perry, ON.*

			QUANTITY:
BRING OWN TABLE	\$40.00 + HST	\$45.20	
6'FT TABLE	\$60.00 + HST	\$67.80	
8'FT TABLE	\$80.00 + HST	\$90.40	

TOTAL SUBMITTED:

CHECK IF REQUIRED:

CORNER	\$5
WALL	\$5
WALL + HYDRO	\$10

We have read and acknowledge vendors liability insurance terms*
Please see website for details*

EXHIBITOR SIGNATURE: _____

**Electronic "email" signatures to this Agreement are acceptable and carry with it the same full force and effect as an original signature.*

NOTE(S):

- All space includes 1 chair.
- To confirm a reservation, this application must be accompanied with **FULL PAYMENT**.
- All payments are **NON-REFUNDABLE** and **NON-TRANSFERRABLE**.

DATE: _____

Please email contract and payments via etransferpopvendors@gmail.com

* **SET-UP TIME: 8AM - 10AM / EVENT TIME: 10AM - 3PM**

* **NO ADULT MATERIAL CAN BE DISPLAYED OR SOLD**

