

November 17-19, 2017

HOLIDAY CRAFT & GIFT FESTIVAL

Company Name: _____ Show Contact Person: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone : _____ Email: _____

BOOTH CHOICE #1 _____ 2# _____ #3 _____ Cell Phone: _____

PRODUCTS DISPLAYED: _____

(1) IF YOU ARE CONDUCTING SALES SUBJECT TO RESALE TAX

PLEASE PROVIDE YOUR RESALE NUMBER. _____

NEVADA STATE RESALE TAX NUMBER _____

**(2a) IF YOU ARE NOT CONDUCTING SALES SUBJECT TO RESALE TAX,
PLEASE PROVIDE YOUR DRIVER'S LICENSE # OR CORP TAX I.D. NUMBER**

DRIVER'S LICENSE #
OR CORP TAX I.D. #

(2b) Check one: _____ No Sales Are Being Made or Solicited At this Event _____ Items sold ARE EXEMPT FROM SALES TAX

(3) CONTRACTORS LICENSE NUMBER: _____

By signing this contract, customer confirms that he/she has read, discussed and understands all terms, conditions & fines on both sides of this agreement and agrees to be bound thereto. Exhibitor understands that additional fees will apply if the terms & conditions set forth are not completely adhered to. By acceptance of this agreement, the exhibitor expressly releases On The Edge Promotions, Inc. from any and all liability for any damage, injury or loss to any person or goods from the rental and/of occupation of show spaces. All payments are non-refundable. Should Exhibitor provide written notice of cancellation at least thirty-one (31) days prior to the first day of the above referenced show, no additional funds shall be due. If written notice of cancellation is provided within thirty (30) days of the first day of the show, the Exhibitor agrees it will immediately pay the full tract amount set forth above to On The Edge Promotions, Inc.. Execution and delivery of this agreement shall constitute an agreement to reserve and rent space indicated below at the aforesaid rate subject to the terms and conditions of this agreement.

AUTHORIZED SIGNATURE: _____ **PRINT NAME:** _____ **DATE:** _____

SALES REPRESENTATIV : L ORR **SHOW MANAGER:** _____

For Office Use Only

BOOTH: _____ BTH. COST: _____
SIZE : _____ DEPOSIT: _____
TYPE: _____
CODE: _____ BALANCE: _____

Make checks payable to:
ON THE EDGE PROMOTIONS, INC.
PO Box 1388
Placentia, CA 92871

PAYMENT AUTHORIZATION

Company Name: _____ Card Holder: _____

Address on Card: _____

City: _____ State: _____ Zip: _____

Amount to charge: _____ November Craft Show balances to be run on 10-28-17

Type:   

Exp. Date : _____ Authorized Signature: _____ Signed Date: _____

IMPORTANT: By signing this credit card payment you authorize On The Edge Promotions, Inc. to charge the above noted amounts. The balance for each show is due thirty (30) days prior to the starting show date. If payment is not received, your credit card will automatically be charged the balance. All payments are non-refundable. If exhibitor cancels within thirty (30) days of the event, the entire contract amount shall be due and payable to On The Edge Promotions, Inc. within ten (10) days of invoice.