

# APPLICATION A : INDOOR EXHIBIT SPACE

COLONIAL DAYS JULY 14<sup>th</sup> – 17<sup>th</sup>, 2010

BOOTH #

COMPANY NAME:

ADDRESS, CITY, PROVINCE:

POSTALCODE \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\*\* please provide email and/or fax in order to receive your package next year as we are reducing mailouts\*\*

# OF BOOTHS REQUIRED: \_\_\_\_\_ Please list booth preference(s) \_\_\_\_\_  
(map on back of this page)

Booths are allotted on a first come first served basis – another booth will be assigned if your preference is taken.

★NAME OF PERSON TO BE ON CHEQUE FOR PERFORMANCE BOND REFUND:

BRIEF DESCRIPTION OF EXHIBIT:

## Inside Exhibit Daily Show Hours are: 11:30am to 10:00pm

### RENTAL RATES for INSIDE SPACE

1 (One) 10 x 10 booth @ \$385.00 + \$19.25 GST =	\$404.25
_____ additional 10 x 10 booths @ \$330.00 ea. + \$16.50 GST =	_____
_____ *4 Day Gate Admission passes @ \$20.00 ea. (19.05+.95 GST) =	_____
_____ Single Day Gate Admission pass @ \$6.00 ea. (5.71+.29 GST) =	_____
\$100.00 refundable Performance Bond =	\$100.00
(see rule #4)	
TOTAL -	_____

\* One free 4 day gate admission pass will be provided for each 10 x 10 inside booth.

\_\_\_\_\_ Please mail passes with space rental receipt \_\_\_\_\_ Please hold passes for pick up at show office

**Absolutely NO KNIVES** (unless for culinary purposes), **SWORDS**, or **SMOKING APPARATUSES** allowed to be sold through any exhibit or display. **IF CAUGHT SELLING THESE ITEMS, WE RESERVE THE RIGHT TO REMOVE YOU FROM THE GROUNDS.**

**NO APPLICATION WILL BE ACCEPTED UNLESS PAID IN FULL.  
ENTRY DEADLINE –JUNE 24, 2010.**

✓ **We now accept payment by VISA or MASTERCARD: CARD #** \_\_\_\_\_  
**EXPIRY:** \_\_\_\_\_

I hereby agree to the rules and regulations for exhibit space as printed in the prize list.

SIGNATURE: \_\_\_\_\_

**Please Return Application to:** Lloydminster Agricultural Exhibition Association Ltd.

OFFICE USE ONLY:

PAID INVOICE # _____	DATE PD _____	BOND PAID? YES NO
CHARGED INVOICE # _____	DATE CHG _____	BOND AMT \$ _____
AMOUNT: \$ _____		