

Application for Exhibit Space – Juneau Home Show – March 5 - 7, 2010

Email: seabia@gci.net Phone: (907) 463-5774 Fax: (907) 463-5821 Mail: PO Box 33259, Juneau, AK 99803

COMPANY NAME				
CONTACT PERSON				
ADDRESS				
CITY	STATE	ZIP	WEB Site Address	
PHONE	FAX	CELL	E-MAIL	

Exhibitor Needs – Check all that Apply

Electrical Hookup (\$50.00 additional fee)

Phone Line (\$80.00 additional)

Cable Modem (\$50.00 additional)

30" x 72" Tables (no fee)

15" x 72" Tables (no fee)

Chairs (no fee)

Tablecloths (no fee)

Skirting for the tables (no fee)

***Note any additional special consideration for you space:**

Booth Numbers Requested

1st Choice _____

2nd Choice _____

3rd Choice _____

Method of Payment

AMOUNT: _____

Check payable to SEABIA

VISA

MasterCard

Cardholder's Name: _____

Credit Card Number: _____

Expiration Date: _____

By checking this box and submitting this form, I authorize a charge to the credit card entered above.

- 50 % payment must accompany this application. Full payment required by 1/01/10.
- No sub-leasing of booth(s).
- Acceptance of any company, person, or exhibit is entirely at the discretion of Home Show management.
- All cancellations must be made in writing. No refund will be given after 2/01/10.
- **No unmanned booths.**
- We hereby apply for booth exhibit space in the 2010 Juneau Home Show. We agree to abide by the Terms and Conditions stated on the front and reverse side of this contract and understand the cancellation, acceptance and payment policies.
- **We hereby agree to pay SEABIA a \$250 fee if we leave Excess Garbage at Centennial Hall and a \$250 fee if we Tear Down of our Booth Early.**

I have read these conditions and acknowledge them as part of this contract.

EXHIBITOR:

By checking this box and submitting this form, I agree to all terms and conditions of this contract.

Name of person agreeing to these conditions:

Title: _____ Date: _____

FOR MANAGEMENT'S USE:
(Please do not write in this space)

50% Deposit _____

Full Payment _____

\$250 Garbage/Early Teardown Fee _____