



EXHIBITOR APPLICATION AND AGREEMENT

PLEASE NOTE: NO REFUNDS FOR CANCELLED REGISTRATIONS AFTER FEBRUARY 25, 2020.

EXHIBITOR CONTACT INFORMATION

Company Name _____ Email _____

Contact Name(s) _____ Telephone (Main) _____ (Cell) _____

Mailing Address _____ www _____

City _____

PROV. / STATE _____

POSTAL CODE / ZIP _____

CALCULATE YOUR COST

BOOTH

QUANTITY	SIZE	PRICE	TOTAL
_____	8' x 10' (80 sq')	\$450.00 (until Jan 31)	_____
_____	8' x 10' (80 sq')	\$500.00 (after Jan 31)	_____

INDOOR BULK SPACE

QUANTITY	SIZE	PRICE	TOTAL
_____	500 sq'	\$1,250.00	_____

OUTDOOR BULK SPACE

QUANTITY	SIZE	PRICE	TOTAL
_____	500 sq'	\$1,000.00	_____
		ADD 5% GST	_____

PLEASE NOTE:
INDOOR BULK SPACE EXHIBIT
HAVE A MAXIMUM DOOR ENTRY
RESTRICTION OF 12 FT HIGH AND 10 FT WIDE.

TOTAL _____

We Propose To Exhibit The Following Items: *required*
(In the event that these items are not accepted, any monies paid shall be refunded)

Note: only items that have been approved and accepted will be permitted, no exceptions.

Note: Applications Will not be processed unless all monies are received. All monies paid after acceptance of this application are non-refundable after February 25, 2020.

Authorized signature here indicates acceptance of the Terms & Conditions as set forth by the Strathcona Regional District. Please refer to the exhibitor contract agreement.

AUTHORIZED SIGNATURE _____ DATE _____

PLEASE PRINT FULL NAME _____

PLEASE CHARGE MY VISA MASTERCARD CHEQUE ENCLOSED

CARD NUMBER _____

CARDHOLDER NAME _____

EXPIRY DATE _____ CVC _____

BILLING ADDRESS _____

BILLING TELEPHONE _____

BILLING CONTACT _____

Please make all cheques payable to the Strathcona Regional District.

Please go to www.adventureshow.ca to register or return a copy of this form to:

Strathcona Gardens Recreation Complex
225 South Dogwood St.
Campbell River BC V9W 8C8
250-830-6777
nioas@srd.ca

