

The **TATTOO ARTIST SHOWCASE**

June 17th – 20th, 2009 DAVENPORT, IOWA

PRINT CLEARLY

YOUR INFORMATION

PRINT CLEARLY

COMPANY NAME		FULL CONTACT NAME		
STREET				
CITY		STATE	ZIP CODE	
COMPANY PHONE / FAX NUMBERS /		CELL PHONE #	SECOND CONTACT #	
EMAIL		WEBSITE		
REFERENCE #1	NAME AND CONTACT PH #	REFERENCE #2	NAME AND CONTACT PH #	

VENDING INFORMATION

Please list the kinds of items you will be selling below

MISCELLANEOUS

How many shows do you attend a year?

How did you hear about us?

How many shows has your company attended?

Willing to offer something for door prizes?

List your favorite 3 conventions:

YOU MUST PROVIDE PROOF OF A \$100,000 INSURANCE POLICY
Please call for details on this requirement

ALL INFORMATION BOXES MUST BE COMPLETED Blank spaces will delay your application

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APPLICATION TO REQUEST VENDOR SPACE

TERMS & CONDITIONS: Indoor/Outdoor Productions herein referred to as Management and the Artist/Vendor herein referred to as Exhibitor. Exhibitor is required to obtain proper license (s), permit(s), and to collect and report all sales tax generated at the show as required by governmental agencies, City, and State. Exhibitor must abide by the published schedule of show hours, move-in and move-out times. Exhibitor must have booth occupied at least 30 minutes prior to the opening of the show Exhibitor may not terminate his/her exhibit and leave the show before the published closing of the show. It is Exhibitor's sole responsibility to leave the rented space in its original condition; otherwise Management may impose a trash removal or damage fee of at least \$50. Management assumes no responsibility and liability for merchandise or display left in exhibit area beyond the move-out time. Be responsible for his/her own liability and action resulting from the operation of his/her exhibit. Exhibitor will abide by all City, County, and State laws regulating tattooing and/or piercing. Management prohibits any and all illegal actions and activities. Exhibitor agrees to hold Management harmless from any and all liability including but not limited to bodily injury, illegal activity and actions, property damage and all other liabilities arising from the operation of the exhibit or products sold during the show. Management will not be responsible for any loss of property due to theft, fire, accident, or other causes. Due to the nature of trade show business, Exhibitor assumes full obligation of this contract including the full balance due once contract is signed. No refunds of any deposit or fees paid. Booth space will not be guaranteed until Management has received full payment. Management reserves the right to cancel Exhibitor's contract and forfeit any deposit made if full payment is not received four weeks prior to the show date. Management offers no guarantee on attendance and no guarantee on Exhibitor's performance. No subletting of booth space is allowed. Exhibitor will forfeit the right to exhibit without refund if this policy is violated. No taping or nailing is allowed on walls or poles. Management has the right to rent space to firms, companies, individuals and organizations engaged in similar or competitive business to Exhibitor. Management will not offer exclusive rights to any Exhibitor. Management reserves the right to refuse business to anyone or organization.

PRINT CLEARLY I _____ of _____ have read and understand the above information and agree to it in its entirety (NAME OF COMPANY)

Signed _____ Dated ____/____/____

SHOW HOURS

Wed (VIP 5-7pm) 7-10pm Thurs 3pm - 10pm FRI 11am - 10pm SAT 11am - 10pm

LOAD IN TIMES

Tuesday 10 am to 6pm Wednesday 8am 2pm all setup must be done within these times

LOAD OUT TIME

Any time after close of show on Saturday and during the day Sunday

Initials _____

MAIL TO:

TATTOO ARTIST SHOW
C/O INDOOR/OUTDOOR PRODUCTIONS
402 W 4TH AVENUE
COAL VALLEY, IL 61240

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VENDOR PAYMENT FORM

DESCRIPTION	COST	QTY	SUBTOTAL
10 X10 BOOTH INCLUDES: POWER (20amps), PIPE & DRAPE 1 TABLE, 2 CHAIRS, TRASH CAN, 3 PASSES	\$ 400.00		
10 X12 BOOTH INCLUDES: POWER (20amps), PIPE & DRAPE TABLE, 2 CHAIRS, TRASH CAN, 3 PASSES	\$ 400.00		
EAST WALL	\$400.00		
EXTRA PASSES MAX # IS THREE (3) PER BOOTH	\$10.00 each		
CLEANING & DAMAGE DEPOSIT PLEASE PROVIDE A SEPARATE CHECK SO IT CAN BE RETURNED AT CHECK OUT	\$100.00		\$100.00
Space will not be guaranteed until full payment has been received A \$10.00 FEE & 50% HOLDS YOUR SPACE FOR 30 DAYS. AFTER 30 DAYS ANY INCREASE IN COST WILL BE ADDED TO THE BALANCE AND YOU WILL BE GIVEN WHAT SPACE IS STILL OPEN. IF TOTAL AMOUNT DUE IS NOT PAID BEFORE 5-15-09 YOU LOSE YOUR SPACE WITH NO REFUND	TOTAL AMOUNT DUE Make checks payable to I/O Productions		

BOOTH SPACE(S) PICK 3 PER SPACE REQUESTED 1) ___/___/___ 2) ___/___/___	AMOUNT PAID NOW \$ _____ .00	BALANCE DUE BY ___/___/09 \$ _____ .00
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SALES SLIP AND CREDIT CHARGE AUTHORIZATION

ACCOUNT # _____ **EXP DATE** ___/___/___

AMOUNT TO BE CHARGED \$ _____

PRINTED NAME OF CARD HOLDERS NAME

Indoor/Outdoor Productions 402 W 4TH AVENUE COAL VALLEY, IL 61240

Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer. The issuer of the card identified on this item is authorized to pay the amount shown as **Total** upon proper presentation. I promise to pay such **Total** (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card. I accept that this is a no refund and no return and no cancellation charge. Cardholder acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer.

DATE	AUTHORIZATION NUMBER	REFERENCE NUMBER
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Date: _____ **Title:** _____ **Authorized Signature:** X _____

I hereby enter into contract with Management for exhibit space(s) as indicated. I understand and agree to the terms and conditions of this contract, which is legal and binding in the courts of law in IOWA. I agree Management will not make any refund for cancellation or failure to show at the show. I understand that this contract can not be canceled. My company and/or I agree to pay the full amount and assume the full responsibility of this contract.

INITIAL _____

Show management use only

Date received _____ **Payment Type** _____ **Space(s) assigned** _____ **Checked in** _____
App complete _____ **Missing** _____ **Insurance** _____ **Acknowledgement sent** _____