EXHIBITOR INFORMATION

Trade Name:_____

Name:_____

Types of Merchandise._____

Address:_____

City_____State___Zip_____
Signature:_____

Bus. Phone ( )_____ Home Phone ( )_____

e-mail address: _____

Date_____

I agree I will not hold Bob & Janet Neily responsible for any loss due to theft, breakage, damage, injury or loss to person or goods for any cause whatsoever.

No exhibitor may withdraw from the show until it terminates and absolutely no packing may be started before management's O.K. or the closing of the show (or which ever comes first).

Signature _____

Authorization to post my participation on CE website for Fall Festival
yes no

Preferred Setup time	Friday 9/24th	
(please check)	_____	11:00 am
	_____	1:00 pm
	_____	3:00 pm
	_____	6:00 pm
	Saturday 9/25th	
	_____	6:00 am