



Sept. 4, 2019 Senior American Day Exhibitor Application

CompanyName: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Web Page: _____

What do you plan to exhibit? _____

What product lines do you represent? _____

Exhibit space will be assigned on a first come first served basis. Booths cost \$200 for 8x8' Booths come standard with back and side draping and 110 volt electricity. Any questions please call Jan Hamilton at 901-487-3075

Two exhibitor passes will be given to all 8'X8' exhibitors. Additional passes may be purchased for \$15 each.

For space larger than 8'x8' or other ways to participate in the Delta Fair, please call: Condred Gowan at 901-867-7007

Please sign this **COMPLETED** application and fax or mail to Delta Fair Inc. with full payment to secure your space. No space is confirmed until payment is received. Make checks out to: Delta Fair We can also take signed fax applications with a credit card number. Contract may be canceled and deposit returned minus \$50 processing fee no later than August 14, 2019. If space is canceled two weeks out from the date of the first day of the show, or any time there after, all payments will be forfeited and if applicable, any unpaid late balances will be due.

ALL Vendors must submit a standard accord form for commercial liability insurance with no less than \$1 million dollars worth of coverage. It must show Delta Fair Inc., Agricenter International, Shelby County Government and all of their employees as additionally insured. You can also purchase insurance from DF. call for price.

Check your option: ___ 8x8 \$200 for Senior Day only 9/4/19 110v Electrical complimentary

Booth/Space Total: \$ _____ Enclosed Payment: \$ _____ Card Type: _____

Card Number: _____ Expiration Date: _____ Security Code on back: _____

Billing Address: _____

"My firm acknowledges the rules and regulations set forth by Delta Fair (posted on deltafest.com) and that our employees and representatives will at all times observe, perform and abide by such rules."

Official Representative Signature: _____ Date: _____

Title: _____

Return this fully completed application with your full payment to:

Delta Fair
Attention - JAN HAMILTON
P.O. Box 1327, Cordova TN, 38088-1327

Local: (901) 867-7007 - Toll Free: 866-99FAIRS - Fax (901) 867-7121 or deltafest.com