

For Office Use Only

\_\_\_\_\_  
Date of Deposit

\_\_\_\_\_  
Amount



## 2018 Commercial Exhibit Deposit

\_\_\_\_\_  
(Name of company/exhibitor) (Contact Person)

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Phone Email

I (we) would like to reserve booth space(s) for the 2018 Fort Bend County Fair by paying a deposit in the amount of \$50.00 **per booth space**.

I would like to reserve my current space for 2018.  
CC # \_\_\_\_\_ Expiration Date \_\_\_\_\_  
CVC \_\_\_\_\_ Zip Code \_\_\_\_\_

I would like to return but would like a different / additional space for 2018.

I will not be returning in 2018.

This deposit must be paid by **noon** on the closing date of the fair, **10-8-17**. I (we) understand that the balance of this lease must be paid by **August 1, 2018**. If not, my deposit will be forfeited and the booth space(s) will be released for rental.

**No deposit will be refunded!**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date