



51st Annual Maine State Federation of Fire Fighters Convention
HOSTED BY: THE FARMINGTON FIRE BENEVOLENT ASSOCIATION

VENDOR/EXHIBITOR CONTRACT

Registration contract must be received by August 15th 2014. Registration Questions (207)778-3235

Company: _____ (Please print legibly)

Parent Company/Division: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Contact Name*: _____ Title: _____

* This is the name of the person who will receive your invoice and other exhibitor related information

| | | |
|------------------------------|--------------------------|-------------------|
| Business Phone: (____) _____ | Cell Phone: (____) _____ | Fax: (____) _____ |
|------------------------------|--------------------------|-------------------|

| |
|------------------------------------------------------------------------------|
| Email Address: _____ (a registration confirmation will be emailed to you) |
| Exhibitor Website: _____ |

PRODUCT or SERVICES: _____

NAME OF INSURANCE COMPANY: _____

NOTE: Proof of Insurance must be attached to this form (details below)

| Vendor/Exhibitor Space | (10x14, 8ft table) | = \$ | Cost |
|--------------------------------------|--------------------|------|----------------------|
| Inside Booth Space(s) # _____ | \$150 ea. | = \$ | _____ |
| Outside Booth Space(s) # _____ | \$100 ea. | = \$ | _____ |
| Call for pricing on additional space | | | |
| Total Cost of Exhibition Space Due | | | <input type="text"/> |

Your Vendor/Exhibitor registration contract must be received no later than August 15 2014. All payments are non-refundable in the event the Exhibitor cancels, or chooses not to be present for the event. Spaces are on a first-come, first-paid basis

| For Official Use Only | |
|--------------------------|-------|
| Date Received | _____ |
| Date Paid | _____ |
| How Paid | |
| Check # | _____ |
| Credit | _____ |
| Confirmation Notice Sent | |
| Date | _____ |
| Initials | _____ |

Payment- Checks Made Payable To: Farmington Fireman's Benevolent Association

As a participating vendor, I agree to be open for display beginning on Friday at 10 am until 8pm & Saturday from 8 am until 5pm (Sunday is OPTIONAL).

Authorized Signature: _____ Date: _____

By signing I acknowledge that I have received the rules and regulations contained in this contract. The signed contract shall become a binding contract in accordance with the terms of the agreement and the rules and regulations.