



**THE 2008 WESTERN FAIR – September 5<sup>th</sup> to 14<sup>th</sup>  
LIFESTYLE BUILDING  
Application Form**

FIRM NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ POSTAL: \_\_\_\_\_  
 CONTACT: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

**PRODUCT/SERVICE DESCRIPTION:** Please provide a complete description of the product or service you wish to sell. Please note only those items described in the official contract are allowed to be sold or displayed in the exhibit.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PRICING:** Basic booth size is 10' x 10' or multiples thereof.  
**Rates Include:** 1-Unit of Hydro/10 x 10 (max 6 units), A Complement of Admission Tickets, Booth Drapery

Exhibitor ( ) Yes	Vendor (Cash n/Carry Sales) ( ) Yes
1 – 2 booths = \$665 per 10 x 10	1 – 2 booths = \$930 per 10 x 10
3 – 5 booths = \$600 per 10 x 10	3 – 5 booths = \$885 per 10 x 10
6 or more = \$570 per 10 x 10	6 or more = \$855 per 10 x 10
Corner is Additional: \$60 per corner	

# of 10 x 10 Booths: _____ x \$ _____ = \$ _____	SUB TOTAL = \$ _____
# of Corners: _____ x \$60.00 = \$ _____	Plus 5% GST = \$ _____
	Total Rental Cost = \$ _____
<b>Authorized Signature:</b> _____	<b>Date:</b> _____

**DEPOSIT:**  
 Forward a deposit of **50% of booth rental.** **A \$20 fee will be applied for all NSF cheques**

VISA  AMEX  MASTERCARD  CHEQUE ENCLOSED  (Please make payable to **Western Fair Association**)

Card #: \_\_\_\_\_ Expiry Date : \_\_\_\_/\_\_\_\_  
 MM YY

Name on Card: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_

**Bank Transfer: Please contact Lena Lindberg for banking information at 519/438-7203 ext. 228**

**Deposits are non-refundable for any reason if application is cancelled within 60 days prior to September 5, 2008. Applications received without the required deposit, will NOT be processed. Receipt of application does not guarantee availability of space. If no space is available, deposit will be returned. Booth locations are subject to change at the discretion of show management.**

<b>For Office Use Only:</b>			
Date App Received: ____/____/____	Contract # _____	# of N/C Strips: _____	# of N/C Units: _____
Exhibitor ( ) Vendor ( ) Booth #: _____	Booth Size _____	Building _____	
Contract Price: \$ _____	Less Deposit Received: (\$ _____)	Balance Due: \$ _____	
Date Rec: _____		Receipt # _____	

**Return signed copy & deposit to:** WESTERN FAIR ASSOCIATION, P.O. Box 7550, LONDON ON N5Y 5P8 519/438-7203 ext 305 or 800/619-4629  
 F: 519/438-7481 Attn: Mary Anne Weber maweber@westernfair.com