

Golf & Craft Beer Festival 2017 Exhibitor Agreement

San Diego
St. Mark Golf Club - May 12th & 13th

Las Vegas
TaylorMade Golf Experience - June 9th & 10th

Company Name _____
 Contact Name _____
 Company Address _____
 City/State/Zip _____
 Office Phone _____ Cell Phone _____
 Email: _____
 Product or Service _____

Exhibitor Space

Included: If you need a tent provided, you will receive a 10x10 vinyl canopy (no back or side walls) 6 foot table with vinyl cover, 2 chairs and 2 exhibitor badges.

Additional Cost: Tent back & side walls, electrical, extra tables, linen table cloth, extra chairs and extra badges.

PLEASE NOTE: Vendors are responsible for any selling permits necessary and collecting any taxes required by state law.

- | | |
|--|---------------------|
| <input type="checkbox"/> 10' x 10' Booth | \$ _____ |
| <input type="checkbox"/> 10' x 20' Booth | \$ _____ |
| <input type="checkbox"/> Corner Booth or Premium Space | \$ _____ |
| <input type="checkbox"/> 10' x 10' Driving Range Space | \$ _____ |
| <input type="checkbox"/> 10' x 30' or larger | \$ Call _____ |
| <input type="checkbox"/> Electrical | \$ _____ |
| <input type="checkbox"/> Linen Table Cloth | \$ _____ |
| TOTAL DUE: | \$ _____ (Per Show) |

Check All That Apply:	QTY
<input type="checkbox"/> Please provide extra table(s)	_____
<input type="checkbox"/> Please provide extra chair(s)	_____
<input type="checkbox"/> Extra Exhibitor badges	_____
<input type="checkbox"/> I am interested in a hotel room at a discount rate	_____

PAYMENTS

50% payment due within 14 days of signing this agreement.

Full payment is due 45 days prior to the show date.

Assigned Booth Number(s): _____ Sales Rep: _____

PAYMENT DETAILS:

Payment Method: Visa MasterCard American Express Check Enclosed PayPal

Credit Card: **NOTE: All credit cards/PayPal will be charged 3% in addition to the total payment amount. By signing you agree to all terms and conditions, agree to these charges and agree not to charge back this account. Your credit card charge will appear as "Spear/Hall Communication, Inc." on your statement.

Credit Card Number: _____ Expiration Date: _____
 Security Code: _____ Deposit Amount: _____ Date Charged: _____
 Name on Card: _____ Final Amount: _____ Date Charged: _____
 Billing Address: _____ State: _____ *Zip Code: _____ (45 days prior to show date)
 Signature: _____ Date: _____

*Mandatory for billing

Payment, Procedures, & Cancellation Policy:

No refunds will be made if space is contracted and not used, nor will any refund be made for space used for part of the event. For refund consideration, cancellation of exhibit space must be directed to the address specified herein. If cancellation occurs 90 days prior to the event, a 50% refund will be applicable. If cancellation occurs less than 60 days prior to the event, no refund will be applicable. This refund will be based on the total amount of the contract. Any refund due to exhibitor in accordance with terms herein will be payable within 60 days following the conclusion of the event. All deposit monies for space reservations will be forfeited if the exhibitor fails to make payments as required, violates any exhibitor rules, or cancels space without notice. We anticipate good crowds, but variables like weather, breaking news events, and unforeseen circumstances may impact attendance. We do not guarantee attendance figures. We do not guarantee category exclusivity unless specified in writing.

Signature: _____ (Approval to process payment)

Please Make checks payable to: **"Spear/Hall Communications"**
 Please fax, mail or email contract to: **Spear/Hall Communications**
3430 Lark Street, San Diego, CA 92103

Email: info@spearhall.com • Phone: 619.683.3700 • Cell: 760-208-7470 • Fax: 619.878.2736
www.golffestshows.com