



9th Annual HOME & BUSINESS SHOW /TOUCH A TRUCK

To be held in the hallways & various rooms at CC RESA.

Set-up Time: You may set up Friday, May 6 from 4:00 – 5:30 pm or Saturday, May 7 between 7:00 – 8:30 am. Your booth display must be set up by 8:45 am so the show can open promptly at 9:00 am. Upon getting your items into the building you must move your vehicle to the parking lot south of the RESA Building.

Tear Down Time: Tear down begins at 3 pm on Saturday and we would appreciate it if you would be completed by 4 pm. Vendors are not allowed to tear down prior to the end of the show and must remove all display items that day.

Booth Information/Rental: Pricing of booths/tables are separated by home based/non-profits & store front businesses – all vendors are responsible for providing their own table cover & skirting. Tables are 5' long.

- Level One is available to any business, individual, home based business or non-profit. The cost for members is \$100 and \$200 for non-members.
- Level Two is available to any individual, home based business or non-profit. (\$50 for members & \$100 for non-members)
- Level Three is an outside space for businesses with items such as Vans, Boats, RV's, etc, or for any business that just wants to set up their display outside. The space includes no tables and can fit up to 3 boats or RV's. (\$100 for members and \$200 for non-members).

If your inside booth requires an 110v electrical outlet, you must make the request on the application (a limited number of booths will have this option) and you must bring your own extension cord. All merchandise must be displayed inside you booth space and not placed in aisle ways. Displays and merchandise cannot be fastened or attached to flooring or walls and tape can not be used on walls or windows. It is not a requirement, but we would encourage each vendor to have some kind of game, such as a putting green, spinning wheel or drawing, etc – it is an extra way to attract people to your booth.

Certificate of Liability Insurance: Exhibitors must supply the Clinton County Chamber of Commerce with a certificate of liability insurance.

Responsibility: The Chamber will not be responsible for any loss or damage to exhibits while in transit to or from the building, or while in the exhibition building. The Clinton County Chamber of Commerce assumes no risk and by acceptance of this agreement, the exhibitor releases the Chamber from any and all liability for any damage, injury, or loss to any person or goods from any cause whatsoever. The Clinton County Chamber of Commerce reserves the right to accept / reject entries to preserve the quality and diversity of the show.

Prizes: A Grand Prize drawing for both adults and children will be done to encourage guests to visit each vendor. A vendor card will be given to attendees as they enter the show. To be eligible for the Grand Prize Drawing, the guest must visit each booth and have their card signed. Rather than the Chamber giving out prizes throughout the day, we would encourage each booth to have some kind of drawing or game for a prize.

For your business to be mentioned in the advertising or the program guide, this agreement & payment must be received at the Chamber office by Friday, April 8, 2011.



Clinton County Chamber of Commerce
HOME & BUSINESS SHOW / TOUCH A TRUCK
Sat, May 7, 2011

Members:

_____ # of Level 1 spaces @ \$100 each \$ _____
_____ # of Level 2 spaces @ \$50 each \$ _____
_____ # of Level 3 (Outside Spaces) @\$100 \$ _____

Non-Members:

_____ # of Level 1 spaces @ \$200 each \$ _____
_____ # of Level 2 spaces @ \$100 each \$ _____
_____ # of Level 3 (Outside Spaces) @\$200 \$ _____

Method of Payment (check one): Cash Check Credit Card

My check or cash is enclosed

I authorize you to charge \$ _____ to my:

Visa MasterCard Discover American Express (check one)

Card holder's name as it appears on card: _____

Account # _____ **Expiration date** _____

Address your billing statement is mailed to

Signature _____ **Date** _____

_____ I need an 110V outlet (you must bring your own extension cord)
_____ We will give out a door prize _____ I have enclosed a copy of our insurance

Please provide a brief (2-3 sentences) description of your business for the program _____

The undersigned Exhibitor agrees to all the terms and conditions as stated in this agreement and understands this constitutes a binding contract with the Clinton County Chamber of Commerce.

Exhibitor acceptance signature _____ Date _____

Business Name: _____ Contact: _____

Address: _____

Phone: _____ E-Mail: _____

Please return this form with payment/charge by April 8, 2011 to:
The Clinton County Chamber of Commerce
PO Box 61, St. Johns, MI 48879 --- 989-224-7248 / Fax: 989-224-7667