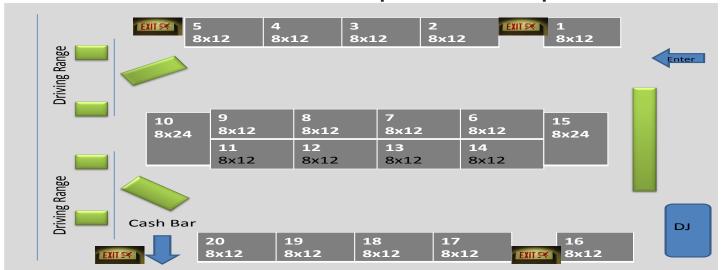


SADOWSKI CENTER MARCH 12 • 2 - 6 PM

2015 Exhibitor's Contract

Exhibiting firm Name:		
Full Address:		
City:	State:	_ Zip Code:
Telephone:	Fax:	_
E-mail Address:		
Authorized Representative:		
Products and Brand names to be Exhibited:		

Booth Location: 1st Choice: _____ 2nd Choice: ____ 3rd Choice: ____ Booth Prices: 8'x12': \$100 8'x24': \$175



In kind merchandise for raffles can be donated in the value of the booth

Print Name / Title: _____

Authorized Signature: ______ Date: _____