

# 2009 Exhibit/Vendor Booth Space Contract



The Kalamazoo Pet Expo is produced and managed by the Kalamazoo Weekly Newspaper, a subsidiary of the Birch River Group. **Please complete this form and return it with your full payment to: Kalamazoo Pet Expo, 125 W. Michigan Ave., Galesburg, Michigan 49053 or fax form to (269) 665-0096 and mail payment.** All booths will be reserved, via application, on a first come basis. For more information call (269) 484-6397 or e-mail [Info@KalamazooPetExpo.com](mailto:Info@KalamazooPetExpo.com). The event is being held at the Kalamazoo County Fairgrounds and Expo Center in Kalamazoo, Michigan located at 2900 Lake Street, Kalamazoo, MI 49048. More information about them at [www.KalCounty.com](http://www.KalCounty.com)

**Check ONLY one below and tell us how many booths you would like.**

- I will be selling birds, reptiles, fish, hamsters, mice, ferrets or other live, small animals at my booth. I would like \_\_\_\_\_ 10 x 10 booths for \$40.00/each.
- I will not be selling any live animals at my booth. I will be selling a product or I will have a display setup in my booth. I would like \_\_\_\_\_ 10 x 10 booths for \$150.00/each.

**Check ONLY if applicable.**

- Please note that we are an animal rescue or non-profit organization. I have included my paper work for verification. Please let me know of the added benefits once you receive this application.

**Applications postmarked before July 27th, 2009 will receive \$5 OFF booth fee.**

**PLEASE TYPE/PRINT CLEARLY**

- Please check this box if you **DO NOT** want the following information listed on the website or in the program.

COMPANY NAME

MAILING ADDRESS

CITY

STATE

ZIP CODE

BUSINESS PHONE

FAX NUMBER

E-MAIL ADDRESS

WEBSITE ADDRESS

CONTACT PERSON/REPRESENTATIVE

CONTACT PERSONS PHONE NUMBER (if different than business number) :

SELLING A PRODUCT? YES NO

SELLER'S PERMIT NUMBER: \_\_\_\_\_

GENERAL DESCRIPTION OF PRODUCT OR SERVICE: \_\_\_\_\_

*Acceptance: Upon receiving full payment with completed application, you will be notified via confirmation of your booth space. If you have not received anything from us prior to August 3rd, 2009, PLEASE CONTACT US! You are not accepted until you get this confirmation.*

AUTHORIZED PERSON (please print)

TITLE

SIGNATURE

DATE

AMOUNT ENCLOSED

CREDIT CARD BILLING ADDRESS

NAME ON CARD

AMOUNT OF CHARGE

(Circle One) VISA MASTERCARD DEBIT

CARD NUMBER

EXP. DATE

SECURITY NUMBER (Three digit)