



CREATURE DOUBLE FEATURE ROUNDUP 4

September 23, 2017

ARTIST ALLEY / VENDOR REGISTRATION

Name (For table): _____

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Website: _____

Please describe what you will be selling or promoting (adult material cannot be displayed) _____

VENDOR /EXHIBITOR
Consists of a six foot table, two chairs
\$25 x _____ Qty = \$ _____

ARTIST ALLEY
Consists of a six foot table, two chairs
\$25 x _____ Qty = \$ _____

<p>Payment in full must be received with your fully completed registration form</p> <p>Payment can be made ONLINE through PAYPAL to LASHUMBAH@COMCAST.NET Email this completed form to ken@CDFRoundup.org Upon receipt of completed registration form, you will receive a confirmation email.</p>	<table border="1"> <tr> <td>TOTAL CHARGES</td> </tr> <tr> <td>\$</td> </tr> </table>	TOTAL CHARGES	\$
TOTAL CHARGES			
\$			
<p>For office only Approval Code _____ Date Approved _____</p>			

CANCELLATION POLICY: Reservations will be confirmed upon receipt of a completed form and full payment. No refunds will be made after **August 1, 2017**. All booth space reservations are based on availability at the time of receipt of the signed contract and payment in full. **Payment in full is required at the time of registration.** Booth spaces are assigned on a first come, first served basis according to date of payment.