

Italian Car Day Inc.

ICD Contact:



www.italiancarday.com
info@italiancarday.com

Vendor Registration Form

Mandatory Section

Bus. Name: _____ Phone: _____
 Address: _____ Fax: _____
 City: _____ Cell: _____
 Web Site: _____ E-mail: _____
 Contact Person: _____ Other: _____

Exhibition Space Options

10x10 ft 100*
 10x20 ft 200*

No utilities are available.

Total Display Cost \$: _____

Vendor to supply shade structure or other display

Paid by **Cheque**
Cash

Please list the products to be displayed or sold in your area:

FULL PAYMENT MUST ACCOMPANY THIS BOOKING FORM TO RESERVE SPACE

By signing below, I acknowledge that having read the exhibitor/Boyd Park information and agree to abide by the conditions that apply to an exhibitor in this event. Event Management reserves the right to refuse any displays deemed inappropriate or against event rules and policies.

I acknowledge, as an exhibitor and vendor, to provide my own insurance as required to cover all goods, material and staff brought onto the premises, and therefore, fully release and discharge the event organizers, officers, volunteers, participants and anyone associated with the event from all liability including, but not limited to, loss or damage, in whole or part.

DATED: _____ **SIGNATURE:** _____

Vendor set up 7- 8 am only

SPELL NAME: _____