

2017 LAKE PLACID MD-20 CONVENTION VENDOR CONTRACT

In witness whereof, the applicant has caused this application to be completed by an officer or representative duly authorized to execute the same. (PLEASE PRINT)

Organization Name: _____

Completed By: _____ Title: _____

Organization Address: _____

City _____ State: _____ Zip Code: _____

Telephone: _____ Contact Person: _____

Email Address: _____ Website: _____

Number of Space(s) Requested: _____

Electricity Required: Yes____ No____ (**NO** is assumed)

VENDOR (\$150) & ELECTRICITY (\$50 if applicable) Payment attached: \$_____
Check made payable to "MD-20 Lions"

Person(s) in charge of your exhibit: _____

Please give a brief description or provide a statement of the nature of the proposed exhibit and product to be exhibited, sold or distributed at the convention.

OFFICE USE ONLY:
ACCEPTED BY MULTIPLE DISTRICT 20 LIONS CLUBS:

By: _____

Title: _____ Date: _____

Space(s) Assigned: _____ Payment Remitted: _____ Check # : _____

Date Acknowledged to Exhibitor: _____