

**PROM & BIRTHDAY SHOW
THE GARDEN BRIDAL FAIR
2010**

**EXHIBITION SPACE
APPLICATION CONTRACT**

Deposit Received \$ _____
 Space # _____
 Sales Rep: _____
 Date: _____
 Acc# _____
 Order# _____

The undersigned, (hereinafter called the "Exhibitor"), hereby applies for space in the Prom & Birthday Show, Thursday February 18th and Friday, February 19th 2010, at the Playdium Mississauga 12pm-8pm and The Garden Bridal Fair, Sunday 18th April 2010 at the Brampton Fair Grounds 9am-6pm. Exhibitor agrees to abide by the Terms and Conditions as stated on the reverse of this Exhibit Space. Application Form, and the rules and regulations contained in the Exhibitor Manual.

EXHIBITOR INFORMATION

Company Name: _____
 Contact: _____ Email: _____
 Address: _____
 City: _____ Phone: _____
 Province: _____ Fax: _____
 Postal Code: _____ Website: _____
 Brands/Products: _____

Exhibitor Order Form

SPACE	DESCRIPTION	RATE	DEPOSIT	SUBTOTAL
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*Prom & Birthday Show 2010 The Garden Bridal Fair 2010

<input type="checkbox"/> *2 FOR 1 SHOWS PROM / GARDEN BRIDAL FAIR		\$1100 +GST	\$550	
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<input type="checkbox"/> *8 FT BOOTH TABLE PER SHOW		\$700 +GST	\$367.50	
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Table cost includes, Draped table, 2 Chairs and Skirting Electricity \$55 +GST for basic 110 Volt electricity setup

<input type="checkbox"/> FULL PAGE PROGRAM AD & BAG INSERT		\$550 +GST	\$275	
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<input type="checkbox"/> *SPONSORSHIP BANNER AD WITH COMPANY INFO LIMITED AVAILABILITY, LOCATED INSIDE THE DOME		\$500 +GST		Order total: _____
				GST 5% _____

Method of Payment

- Check
- Bill Me
- Visa
- MasterCard
- Paypal

Please Indicate Booth number choices in order of preference from the Official Floor Plan

Less Deposit _____
 Total: _____

1st _____
 2nd _____
 3rd _____
 4th _____

BALANCE DUE 30 DAYS PRIOR TO THE SHOW

Credit Card # _____	Card Holders Name _____	Exp. date _____
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Signature _____

I hereby apply for exhibit space. If accepted, I hereby agree to abide by the show rules and regulations features on the reverse side. I authorize RJMSounds to process the interim and final payments on the given credit card. (Initial) _____



PLEASE SCAN AND EMAIL TO: info@rjmsounds.com
 Mailing Address: RJMSounds 340 Nunn Court, Milton, Ontario L9T7M3 *Tel 416 451-9453