



**EXHIBITION/APPLICATION- FORM/CONTRACT**

**PLEASE COMPLETE AND RETURN TO:**

**Newport Fishermen's Wives  
P.O. Box 971  
Newport, OR 97365**

**Show Manager:** Sara Skamser

**Phone:** 541-961-1588

**email:** fishermenswives@yahoo.com

**NAME OF COMPANY / EXHIBITOR / ORGANIZATION:**

**CONTACT PERSON:**

**POSTAL ADDRESS:**

**CONTACT DETAILS:**

Telephone #

Cell #

email:

**NATURE OF EXHIBIT** (PLEASE DESCRIBE - WILL BE USED IN EVENT PROGRAM):

**COSTS:**

Exhibitor Space \$150 per 10' x 10' (good for both days of the event) - # of spaces \_\_\_\_\_\*\*

Electricity (available for food/drink booths) – see Electrical Order Form

\*\*Non-Profit \$100 per 10'x10'

**Total** \$ \_\_\_\_\_

Vendor sites are on or near Port of Newport site (Port Dock 7) 600 SE Bay Blvd. – Newport, Oregon

Exhibitor setup Noon-8:00pm Friday or 6:30am-8:45am Saturday

Security will be provided both days

**PAYMENT REQUIREMENTS** - Full payment is required on or before September 1, 2010 (\$20 for returned checks)

Payment may be made by check or money order (sorry, no credit cards) to:

**Newport Fishermen's Wives** – P.O. Box 971 – Newport, OR 97365

The applicant acknowledges that this application constitutes a binding agreement between the parties and is subject to approval by the Newport Fishermen's Wives Show Management.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**SHOW MANAGEMENT USE ONLY**

Priority # \_\_\_\_\_ Payment Date \_\_\_\_\_

Booth # \_\_\_\_\_ Amount \_\_\_\_\_