



Office Use Only
Acct #:
Date Received:

Exhibitor Name _____

(as it will appear printed on booth signage)

Contact _____

Address _____ City _____ State _____ Zip _____

Office Phone _____ Cell Phone _____

E-mail _____ Website: _____

Description of your products/services: _____

Selling of products is permissible. You must have a NY State Sales Tax ID.
(For food products, prior approval is necessary. Contact The Daily Gazette)

Home Show-Date April 24th 11:00AM- 3:00PM- River's Casino - Schenectady NY

Home Vendors	Non- Home Vendors
_____ \$ 595.00 Single Booth	_____ \$ 695.00 Single Booth
_____ \$ 1,095.00 Double Booth	_____ \$ 1,295.00 Double Booth

_____ \$ 30.00 Additional for Electrical

Non-Refundable Deposit of \$100 is due with contract. Balance due by March 31st.

Single Booth includes: Booth Size 8x10, 2 chairs, one 6' table with tablecloth, skirting, 8' high back drape, 3' high side drape and sign. Exhibitor set-up, load in & pertinent details will be communicated as each event gets closer. All vendors must be completely set up 30 mins before the opening of the event.

_____ **Total Due**

Insurance: A copy of your liability insurance certificate is required
Internet: Access varies with venue.

_____ Deposit Amount _____ Balance Due _____ Payment in Full

Credit Card Information: MasterCard Visa Discover AMEX

Credit Card Number _____

Back Code _____ Expiration Date _____

Name on Credit Card _____

Billing Address _____

Amount Processed _____

Check Enclosed _____ Payable to: The Daily Gazette, mail to- Attention: Events, PO Box 1090 Schenectady, NY 12301
By signing contract, I acknowledge that I have read and understand terms and conditions on page 2, 3:

Authorized Signature _____ **Title** _____ **Date** _____

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When Credibility Matters