

# 49<sup>th</sup> Annual Home Show

April 2-5, 2009

## Exhibit Space Application – Contract

With the intent to be legally bound, the undersigned requests exhibit space, as stated below, in the 49<sup>th</sup> Annual Home Show April 2-5, 2009 at the Family First Sports Park in Erie, PA. Exhibit space will be allocated on a first come first served basis. Although it is the intent of the Builders Association of Northwestern PA (BANWPA) to fulfill the exhibitor's request, specific booth location is **not guaranteed** until deposit and signed contract is returned. Furthermore, the BANWPA is the sole and final authority on all issues and reserves the right to alter the floor plan and/or reassign any exhibit space location without notice.

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**Space requested (Please indicate the number of booths requested in each category):**

\_\_\_ 10' X 9' booth space Perimeter of soccer fields) @ \$550 each (BANWPA Members) \$825 each (Non- Member)

\_\_\_ 10' X 10' booth space (Non-corner) @ \$600 each (BANWPA Members) \$875 each (Non- Member)

\_\_\_ 10' X 10' booth space (Corner) @ \$650 each (BANWPA Members) \$925 each (Non-Member)

**TOTAL: \$**\_\_\_\_\_ (BANWPA Members) **\$**\_\_\_\_\_(Non-Member)

Preferred Locations: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Non-Refundable Deposit Enclosed:** \_\_\_\_\_ booths at \$200 each = \$ \_\_\_\_\_

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**Please print or type:**

Exhibitor Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

By signing this application, we agree to the above, as well as any attached, terms and conditions. Furthermore, the undersigned agrees to hold BANWPA harmless against any and all claims arising out of Exhibitor's participation in the 49<sup>th</sup> Annual Home Show. Exhibitor agrees to abide by the Rules & Regulations for exhibiting as set forth by the BANWPA and agrees that there will be no refunds or cancellations at any time. BANWPA reserves the right to reject any application.

**Signature of authorized agent of exhibitor** \_\_\_\_\_ **Date** \_\_\_\_\_

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**Payment Method:**

\_\_\_ Check make checks payable to the Builders Association of Northwestern Pennsylvania

\_\_\_ Credit Card (MC/Visa Only) # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder's signature \_\_\_\_\_ security code \_\_\_\_\_ (3 digits on back of card)

Please return to: 2415 West Grandview Boulevard • Erie, PA 16506-4511 or fax to 814-833-2636

Phone #: 814.833.3999

Form # - HS47-B