



2016 Vendor Registration Form



Vendor Information:

Company Name: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ **Email:** _____

If you'd Like name badges, please print clearly the names:

Vendor Fees: (Make Checks payable to: Kirkwood Community College we do not except credit cards) and Registration will not be confirmed until Paid.

Saturday & Sunday

(7:30 am – 5:00 pm Saturday and 7:30 am – 1:30 pm Sunday)

	Quantity			Total Price
Inside 8 x 10 Booth Space (no backdrop)	_____ @	\$175.00	\$	_____
Vehicle Display Only Space	_____ @	\$60.00	\$	_____
Electricity (bring own ext. cords)	_____ @	\$25.00	\$	_____
Extra Chair	_____ @	\$15.00	\$	_____
Extra Table (8 ft.)				
Topped & Skirted	_____ @	\$35.00	\$	_____
Plain Table (No skirting or cloth)	_____ @	\$30.00	\$	_____
Would you be willing to help sponsor lunch?*	_____ @	\$100,		
**	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$150 or \$200		_____
<i>**If you sponsor lunch for more than \$100, you will receive 3 tickets for your Company Representatives</i>				
Saturday (Lunch-IA Hall)	_____ @	\$10.00	\$	_____
Sunday (Lunch-IA Hall)	_____ @	\$10.00	\$	_____

Check Enclosed for TOTAL \$ _____

Door Prize Donations:

These donations are distributed to the participating students @ fire School. Please indicate if you are interested in donating: **YES** _____ **NO** _____