

**Pampered Pet Show                      Sunday, June 8<sup>th</sup> 2014                      PAL Center   Danbury, CT   06810**

Please fill out the application completely. Any special request must be on this application in writing, we will make every effort to grant your request and notify you in writing if we can or cannot fulfill your request.

Setup hours: Sunday 9 am - 11 am. Please be setup by 11 am. Show hours 11am – 4pm                      Breakdown 4-6 pm.

Booths are 8'x 8'

**Electricity must be purchased with contract only.                      call                      860-355-3296**

<b>Standard Booth</b>	\$95	8' x 8'			\$
Double Booth 2 spaces	\$175	8' x 16'			\$
				<b>Total</b>	\$
Corner Booth (end)	\$20	Extra If available ( first come first served)			\$
Double End (additional)	\$40	Extra If available ( first come first served)			\$
Electricity	\$25	Must be ordered with contract submittal Electricity is limited and is (first come first served only).			\$
<b>Deposit</b>	<b>Minimum deposit is ½ of your total, Balance due at least 3 weeks before show date</b>				
*Tables and chairs are not provided. You must bring your own set up.					<b>Total</b>
					<b>Deposit</b>
As of a January 2014 all of our vendors will be required by (our) insurance carrier to carry their own insurance. You must provide to us a copy of proof of insurance with your final payment before your space will be assigned see page 2 of contract.					\$
<b>Balance Due</b>					

**Company Name** \_\_\_\_\_ **Applicants Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Web Address** \_\_\_\_\_ **Email** \_\_\_\_\_

Signature of acting authority\_\* \_\_\_\_\_

Print Name \_\_\_\_\_

Shows-4You LLC its agents or employees shall not be liable for property damage or personal injury to exhibitor, agents, guests or employees, which may occur on or about any part of the subject premises, regardless of how such injury or damage may have occurred. Exhibitor waives any claim against Shows-4-You LLC and assumes all liability for loss or damage to exhibitor's property while on the premises. Exhibitor shall hold Shows-4-You LLC harmless and shall indemnify Shows-4-You LLC against any liability or expenses arising out of any claim of injury or damage to any person or property, together with all costs in connection with the defense thereto, including attorney's fees. Shows-4-You LLC reserves the right to refuse exhibits or accept exhibits, as it deems appropriate. If it becomes impossible to hold this event when and where it is now planned, Shows-4-You LLC may cancel this lease without liability, upon returning to exhibitor or applying to another show, all sums paid as rental. If show date is or location is moved Shows 4 You will credit you for the next available date and location. If this agreement is cancelled by exhibitor for any reason, or by management because of exhibitors default or violation of this agreement, monies paid to Shows -4-You LLC shall be retained as follows: cancellation prior to 60 days before the start of show, Shows-4-You LLC shall retain 25% of total rental if cancellation occurs within 60 days of the show date the entire rental by the exhibitor shall be retained by Shows-4-You LLC. This contract shall not be assigned without prior written consent .Booth location is the discretion of management and every effort will be made to accommodate your chosen location.

Please keep my email and phone number private (we do not sell or trade your information)

Privacy Policy: We respect your privacy and will never sell or trade your name, mailing address, or email address. We may receive requests for exhibitor contact information from the public, and will furnish your phone number, website and and/or email addresses unless you've indicated to keep your contact information private.

Description of business, product or service you are offering:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are charging any fees to a credit card please complete this section of the application.

MasterCard  Visa

**Expiration Date**

Month  Year

Billing Zip Code  Security Code Back of Card

Card Number  -  -  -

Name on Card   
Please Print

Phone number associated with card

Address

Authorized Signature \*

Amount authorizing to be charged \$

**Insurance**

You will be required to supply a certificate for proof of insurance during setup and Expo dates.

We must have Insurance Certificate in our possession due with final payment. Please include the name of your insurance company, phone# and contact information. (Also check your Homeowners insurance as they may have this provision available to you.)

Insurance Company \_\_\_\_\_

Phone # \_\_\_\_\_


Contact \_\_\_\_\_

Please state on certificate: Name of show, date and Language that states Shows 4 You LLC, operators and or agents are included as additional named insured and shall be protected and held harmless against any and all claims for loss or injury as stated in show contract.

**Below is a link for event insurance that can be available for the date of shows only (one-time fee per show up to 3 days). Apx. Cost \$39.00 per event or \$89 for a 90 day policy. Check our website for \$10 Discount on event insurance. Or use promo code 4yspring to get the \$10 discount for a total of \$29 for a single event or \$79 for a 90 day insurance policy.**

A yearly plan is available for \$265 to cover all your shows for the year.

**Ross Graham**  
**Artists, Crafters & Tradesman Association**  
[www.actinspro.com](http://www.actinspro.com)  
 888-568-0548  
[info@actinspro.com](mailto:info@actinspro.com)



**Address of Show**

**PAL Center**  
 (Police Activities League)  
 35 Hayestown Rd.  
 Danbury, CT 06811

**(Across from Danbury Town Park)**

860-355-3296

Checks must be made out to: **Shows 4 You LLC**

Please sign and mail contract to:  
 Shows 4 You LLC  
 PO Box 46  
 Gaylordsville, CT 06755

**Email:** [info@shows4you.com](mailto:info@shows4you.com)

**Ct Tax Resale Number**

**Important Food Service !!!**

If you are selling goods at this Expo you are required by the State of CT to have a resale Tax Number:  
 Ct tax number application: 860-297-5962  
 Link to State Tax: [REGISTRATION INFORMATION](#)

If you are providing consumable food to the public you are required to obtain temporary Danbury food service license: Call 203-797-4625 [http://www.danbury-ct.gov/filestorage/21015/21087/21107/22983/TEMPFOODLICE\\_NSEApril2010FormWeb.pdf](http://www.danbury-ct.gov/filestorage/21015/21087/21107/22983/TEMPFOODLICE_NSEApril2010FormWeb.pdf)

You are also required by our insurance provider to have your own insurance for this Show and list Shows 4 You on your rider and provide us with a copy before your space will be assigned.