

Little Wars 2019 Combined Arms! April 23, – April 26, 2020 Vendor Agreement

The following important information has changed from previous HMGS-Midwest applications. Please read carefully, print out and complete this Vendor Agreement Form. Submit the completed forms along with full payment per the instructions at the end of this Vendor Agreement.

- See the **TERMS AND CONDITIONS** are included in the package for full details, but the following has also been reprinted here:
 - To be listed in the program as a vendor, your application and payment must be post marked, by 31 December, 2020. We will be working on a first come, first served basis.
 - Email confirmations will be sent upon receipt of the completed packet and payment.

Application:

Registration Information: (Please Pl	rint Legibly)		
Contact Name:			
Company Name:			
Address:			
City:	State:	_ Zip/Postal Code:	
Phone: Cell:			
Email:			
Web Site:			

Booth Costs: See included Vendor Hall Layouts PDF

•	Standard Booth: Note: Includes 2 tables (8' the rental company) and 2 chairs you will be needing.	chairs. Pleas		size 24"-30" based o	
•	Additional Standard Booth Note: Same as above	(s):	\$200.	00	
•	Standard Booth w/Demo T Note: Located in Lilac roor 24"-30" based on supply fr round table, 4 chairs, direct Please let us know, how m	n only. Include om the rental tily in front of b	compa ooth,	ole (8' in length with any) and 2 chairs. Ac in an additional 10 x	dditional 6' 10 space.
•	Half Booth (Add-On only Note: Includes 1 table (8' in the rental company) and 1 you will be needing.			ize 24"-30" based on	
•	Additional Table and Chair	· Set	\$25.0	O per set	
•	Preferred Location Option: Last year's vendors will ge 2018.Note: Booths are allo Email Date/Time stamp will Payment is required to res ensure you get your reque	t a first right o cated on a firs Il be used to d erve your spa	st com etermi	e-first served basis. I ne the order of assig	Postmark or nment.
	First Choices:	Booths #			
	Second Choice:	Booths #			
	Third Choice:	Booths #			
Booth	ns/Tables Total Amount D	ue:			\$
<u>Hotel</u>	Services:				
•	Electricity:	\$70.00 week	end	□ <u>yes</u>	
•	Wi-Fi	\$50.00 week	end	□ <u>yes</u>	
Total	Due from Hotel Services :	=			\$

Products: For inclusion in the onsite Convention Program, and pre-convention advertising. Plea list clearly the main products or services you will have available for sale. Please also us know if you will be featuring any new products or special items at this convention.
Manufacturer of:
Distributor of:
Retailer of:
Other:
Badge Requests:
 Each Booth (Standard or Half) purchased includes two (2) complimentary badges. Each additional Booth purchased includes two (2) complimentary badges. Please print full name of all those handling sales, involved with setup takedown at the There is a charge for badges over table limit (\$35 each).
1)
2)
3)
4)
5)
6)
7)

• A b	Youth Badges: Please list full names of all chave access to your space. These badges abooth limit. 2) Additional Badges: I am requesting addition badge over table limit.	are free and do not count toward you
• A b	2)Additional Badges: I am requesting addition	
• A b	Additional Badges: I am requesting addition	
b 1		val non mombor hadges @ \$25 nor
		iai non-member bauges @ \$55 per
)	_
2	2)	
3	3)	<u></u>
4	4)	
	ue from Badges =	 \$
Donatio	_	
is the 2 ^r	you like to donate to swag bag? (If not opt ond year for our Swag Bag and is given away quantity is up to you. We expect over 600	free to attendees. What you donate
YES	NO	
•	ou like to donate to the convention for cong Contest)	test prizes? (Best Table of the Day,
YES _	NO	
lf 'YES',	, what item(s) and what quantities will you o	donate:

Advertising:	See included Advertis	ing PDF	
Subtotals from	above –		
	Subtotal, Booths:		\$
	Subtotal, Additional Bac	lges:	\$
	Subtotal, Hotel Services	s:	\$
	Subtotal, Advertising:		\$
	Total Amount Due:		\$
How to submit	your application:		
How to submit	your application:		
1. Online:			
E-mail your	completed forms to: <u>kcab</u>	ai@aol.com	
Submit payr	nent via credit card/debit (card: http://paypal.	me/hmgsmidwest
2. Mail:			
Make your ch	neck out to:	HMGS - Midwe	st
Send comple	ted forms and checks to:	C/O Kevin Caba Vendor Manage 5551 N. Osceol Chicago, IL 606	er a Ave.

Please keep a copy of all forms for your records.

Questions? Please contact me at: 773 594 1301 kcabai@aol.com

Letters with your checks and forms must be postmarked no later than 31 December, 2020, please, to ensure your preferred place at the convention. Additional space will be filled after 31 December, 2020, if available but all signs and inquiries suggest the vendor hall will be filled.