



ULTIMATEEVENTS, INC.

# THE 13TH ANNUAL FOODIE, FUN, & HOME EXPO

Washington County Legacy Park- Hurricane, UT

**Friday & Saturday, October 21-22, 2022**

- ★ 10'X10Inline \$895, 10'X10Corner \$995
- ★ Additional space 10'X10' Inline \$600, and add'L 10'X10'Corner \$700
- ★ 50% deposit due with contract
- ★ Balance DUE: **August 15, 2022**
- ★ All Booths Include 8'back drape & 3'side drape-ALL other items such as carpet and furnishings must be ordered from show decorator.

Company Name: \_\_\_\_\_ Company Contact Name \_\_\_\_\_  
 Contact E-Mail: \_\_\_\_\_ Website: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Company Phone: \_\_\_\_\_ Contact Cell: \_\_\_\_\_  
 Emergency number: \_\_\_\_\_ SCLB#: \_\_\_\_\_ TOTAL BOOTH FEE \$: \_\_\_\_\_  
 Booth size: \_\_\_\_\_ Space # Preference: 1<sup>st</sup> \_\_\_\_\_ 2nd: \_\_\_\_\_ 3rd: \_\_\_\_\_

List ALL Products: Exhibitors will be limited to the listed products/services with prior approval  
 Management Be Specific: \_\_\_\_\_

Check Method of Payment: by Credit Card  or by Check

Send Contract to: sylvia.ultimateevents@gmail.com	Make Checks Payable to: Ultimate Events, Inc. PO Box 986 Riverton, UT 84065	For More Information: Call: 801.599.6664
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**ATTENTION:** By signing this credit card payment agreement you authorize Ultimate Events, Inc. to automatically charge 50% deposit on acceptance of contract. I authorize Ultimate Events to charge the outstanding balance to my credit card account. **I understand that All payments are non-refundable. I also agree to not initiate any dispute on this charge or future charges for this Expo event. \*\*Initials required** \_\_\_\_\_

VISA  MC  AMEX \_\_\_\_\_ EXP \_\_\_\_\_ V-Code \_\_\_\_\_  
 Total Amount Due Amount: \$ \_\_\_\_\_ Future Authorized Payments: \$ \_\_\_\_\_, Date \_\_\_\_\_, \$ \_\_\_\_\_, Date \_\_\_\_\_

COMPLETE MAILING ADDRESS WHERE INVOICES ARE RECEIVED

Company: \_\_\_\_\_ Card Name: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Contract Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office Use Only:

Office Signature: \_\_\_\_\_ Booth(s) #: \_\_\_\_\_ Total Price: \$ \_\_\_\_\_