

www.westernvasportshow.com**36th Annual Show**

Augusta Expo – Fishersville, Virginia (I-64, Exit 91)

Friday, Feb. 23, 2024: 11:00 a.m. - 8:30 p.m.**Saturday, February 24, 2024: 10:00 a.m. - 8:30 p.m.****Sunday, February 25, 2024: 12:00 noon - 5:30 p.m.****EXHIBIT SPACE APPLICATION****Please Print Legibly**

Name: _____
 Business: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (____) _____ Type of Business: _____
 Email: _____



**All categories are limited; booths are sold on a first come, first serve basis.
 If your category is full, your deposit will be returned.**

**Each draped booth measures 10' x 10' with an 8' high backdrop and 3' sides and includes 2 chairs
 PLEASE FILL IN THE APPROPRIATE INFORMATION BELOW TO RESERVE YOUR BOOTH(S):**

▪Number of 10' x 10' Booths:	_____	@ \$450.00 each:	Total	_____
▪Number of Corner Booths:	_____	@ \$495.00 each:	Total	_____
▪Number of 20 x 20 Outdoor Booths:	_____	@ \$375.00 each:	Total	_____
▪Number of 8' x 2' Tables:	_____	@ \$ 30.00 each:	Total	_____
▪Electricity:	_____	@ \$35.00 each:	Total	_____
(Add \$10 fee if using a credit card)		\$10.00	Total	_____

All money sent must be in US currency or equivalent. A \$10 fee will be charged for each check sent for collection.

GRAND TOTAL: _____

◆ DEPOSIT ENCLOSED: _____

BALANCE DUE BY JANUARY 5, 2024: _____

Note: Links to our web page www.westernvasportshow.com are only \$50 per year!! Enclosed is my payment of \$50, and my web address: _____

DEPOSIT IS NON-REFUNDABLE**PAYMENT TERMS:**

◆ A Deposit of \$125, along with this application is required to reserve your booth by **June 5, 2023.**

Full Payment is required by January 5, 2024.

For Office Use Only:

Check # _____
 Check Date _____

Check (✓) one: _____ Paid by check / money order (enclosed) **Please make checks payable to: Western VA Sport Show**
 _____ Please charge my VISA / MasterCard / Discover / American Express (add \$10 fee for all credit card charges)

Card #: _____ / Exp. Date: _____ / CVV#: _____ / Zip Code: _____

Amount Charged: _____ / Signature: _____

It is agreed that if exhibitor fails to meet payments in full when due, he/she shall automatically forfeit any and all rights, privileges and claims of any nature he/she has or may have, including the forfeiture of any payments previously made. Any deviation from the above must be approved in advance by Hanger Enterprises. All space is net.

Limitation of Liability: The exhibitor agrees to make no claims for any reason whatsoever against Hanger Enterprises and its sponsors, for loss, theft, damage or destruction of goods, nor for any injury to himself or employees while in the show. Exhibitor agrees to indemnify Hanger Enterprises and its sponsors against and hold them harmless for any claim arising out of the exhibitor's participation in the Western Virginia Sport Show. Security Watchmen will be supplied at no expense to the exhibitor; however, the Western Virginia Sport Show and its sponsors will not be responsible for any loss or damage suffered by any exhibitors or its employees or guests from any act of theft, vandalism or accidental injury.

Firm: _____ Signed by: _____ Title: _____ Date: _____ -- _____

Please return this application with your payment to:**Western Virginia Sport Show, Post Office Box 606, Churchville, VA 24421.**

A receipt for your deposit will be sent to you, however, please keep a copy of this form for your records.

NOTE: In order to be listed in the Show Program, this Exhibit Space Application must be received by Jan. 30, 2024.**For Office Use Only:**

Paid in Full _____
 Check Number _____
 Credit Card _____

The Western Virginia Sports Show is Produced by: Hanger Enterprise Game Adventures

CONTACT INFORMATION: Cell Phone: 540-255-5120 Home Phone: 540-337-7018 Fax: 540-350-2273 Email: hangerent@yahoo.com