

### **Exhibit Space Application/Reservation Form**

## FEBRUARY 7, 8, & 9, 2020

#### **Visalia Convention Center**

COMPANY: _	
Address:	
	State: Zip:
Contact: _	TITLE:
TELEPHONE:	Fax:
CELLULAR:	EMAIL:
Type prefe	IRED IS X (E.G. 8x10, 10x10, 10x20, 20x20 ETC.)  ERRED: STANDARD (INLINE) _CORNER (ADDITIONAL COST, IF AVAILABLE)  I ST CHOICE 2ND CHOICE 3RD CHOICE  WE WOULD LIKE TO DISPLAY:

#### PAYMENT SCHEDULE:

- \$200 per booth DEPOSIT is due when booth is reserved
- After July 1st, 50% PAYMENT is due at time of reservation
- After December 1st, FULL PAYMENT is due at time of reservation

ALL PAYMENTS ARE NON-REFUNDABLE AND NON-TRANSFERRABLE (PER BOOTH) AND BOOTH RESERVATIONS ARE SUBJECT TO CANCELLATION IF TIMELY FOLLOW-UP PAYMENTS ARE NOT MADE. An Exhibitor Agreement will be mailed to you to confirm your booth reservation.

MAKE CHECK PAYABLE TO:

SHOWCASE EVENTS, Inc.

(800) 700-7469

AND MAIL WITH THIS FORM TO: PO Box 18875

San Jose, CA 95158-8875







OR FAX THIS FORM AND PAY USING THE CREDIT CARD AUTHORIZATION FORM (LOCATED ON THE OTHER SIDE) (408) 960-6685

E-mail: events@showcaseevents.net Web: www.VisaliaHomeShows.com



# **Credit Card Payment Authorization Form**

I acknowledge, authorize and approve the use of my credit card towards payment of booth space at the:

Event Name: _	visalia Home & Patio Springrest			
Event Date(s):	February 7, 8, & 9, 2020	Event#	VI0220	
Company Name	e:			
Contact Name:	Email Address: _			
Telephone Num	iber: Fax Number_			
Type of Credit Card: Visa MasterCard American Express Discover				
Credit Card Number:				
Card Expiration	n Date:    <i>V-Code*</i>   _ Billing Addres	ss Zip Code:		
	Name: Amount			
	ling Address:			
( v-code is the id	ist 3-digits off the back of VISA/MASTERCARD, 4-digits off from	II OI AMILKICAN	LAFNL33)	
•	am the authorized Card holder and approve of the ve. I understand and acknowledge that all payme	_		
(My signature ind	ignature:icates my agreement to this charge and if this authorization is being it is the same as an original. I agree to all terms & conditions as lis	g faxed to Showca	se Events, Inc.	

Please fax signed forms to: (408) 960-6685 or,

email to: events@showcaseevents.net, or,

mail to: Showcase Events, P.O. Box 18875, San Jose, CA 95158-8875

For questions, please call us at: **(800) 700-7469** website: www.VisaliaHomeShows.com