



## 2010 CHI STATE CONVENTION

### Vendor, Exhibitor and Affiliate Vendor Application/Agreement

April 30 and May 1, 2010

#### **CONTACT PERSON;**

Patricia Twyman  
11548 Corte Playa Las Brisas  
San Diego, CA 92124-1547  
(858) 278-4731  
[pattwyman@gmail.com](mailto:pattwyman@gmail.com)

#### **CONVENTION LOCATION:**

Radisson Hotel  
2233 Ventura Street  
Fresno, CA 93721  
Complimentary parking

- Approximately 500 attendees representing over seven thousand members are expected.
- All tables/spaces will be located in a large, secured room with the Chi State Store. All tables are draped.
- Scheduled hours are **Friday, April 30, 11:am to 7:00 pm and Saturday, May 1, 7:30 am to 3:30 pm.**

#### **VENDOR / EXHIBITOR DESIGNATIONS**

A **VENDOR** is a person, company or organization who sells directly from the table/space allocated.

- Two 8 foot tables with 4 chairs or equivalent space: \$400  
( Each additional table or space is \$200)
- One 8 foot table with 2 chairs or equivalent space: \$200
- One half of an 8 foot table with one chair: \$100

An **AFFILIATE VENDOR** is a member, Chapter, or Area of Chi State who sells directly from the table/space allocated.

- Two 8 foot tables (draped) with 4 chairs or equivalent space: \$200  
(Each additional table/space is \$100)
- One 8 foot table with 2 chairs or equivalent space: \$100
- One half of an 8 foot table with one chair: \$50

(ALL VENDORS MUST HAVE A **CA SELLER'S PERMIT** FROM THE BOARD OF EQUALIZATION, 1-800-400-7115 OR [www.boe.ca.gov](http://www.boe.ca.gov))

An **EXHIBITOR** is a company or company who wants to demonstrate or display items without selling directly from the table/space allocated.

- Two 8 foot tables with 4 chairs: \$200
- One 8 foot table with 2 chairs: \$100
- One half of an 8 foot table with 1 chair: \$50

The deadline for inclusion in the convention program is **March 8, 2010**.

Submit the **check (payment in full)**, copy or number from **Seller's Permit** if a vendor, and completed application/s **ASAP** to Pat Twyman, 11548 Corte Playa Las Brisas, San Diego, 92124-1547. All checks must be made out to **Chi State**.

Upon completion of this process, a confirmation letter and a receipt will be sent to you.

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This application is for a (**circle choice**) vendor, affiliate vendor, or exhibitor.

The number of tables/ spaces requested is/are (**circle choice**) 2 1 1/2 \_\_\_\_\_  
OTHER

Amount of check submitted: \_\_\_\_\_

Company/ Organization Name: \_\_\_\_\_

Person in charge of receiving space confirmation and other information:

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_ Email \_\_\_\_\_

The Convention Program will list the products/services to be sold/exhibited (limit to 15 words):

\_\_\_\_\_  
\_\_\_\_\_

Your table/s or space/s will be staffed by (names to appear on vendor/exhibitor badges).

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

We agree to abide by the provisions set forth in this agreement:

Signed \_\_\_\_\_ Position \_\_\_\_\_