

# VENDOR REGISTRATION FORM

(print clearly)

Your Name \_\_\_\_\_ Spouse or Guest Name \_\_\_\_\_  
As you want name badge to read  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

## VENDOR REGISTRATION

*Includes name badge that allows access to all events, Room-to-Room privileges, special motel rate (Tue. - Fri.), Commemorative Pin and Convention Directory.*

OUTDOOR Swap Space (includes room vending).....\$150.00.....\$ \_\_\_\_\_  
*Two or more vendors may share one swap space, but EACH must be registered for the convention.*

*One space is equal to two (2) parking lot spaces. Your vehicle, trailer, merchandise, etc. must fit in your paid area. Plan ahead - purchase enough space. Local Fire Ordinances Require An Approved Fire Extinguisher If You Use A Tent or Canopy. TO RESERVE YOUR LAST YEAR'S SPACE(S), REGISTRATION MUST BE RECEIVED BY JUNE 1<sup>st</sup>*

*Check your preference on space available basis:*

18 x 18 - 2 parking spaces side by side     9 x 36 - 2 parking spaces end to end

ADDITIONAL Outdoor Swap Spaces for above vendors - 9 x 18.....(1 each) x \$ 75.00 ea...\$ \_\_\_\_\_

VENDORS NEEDING ONLY ONE (1) SPACE - 9 x 18.....\$ 95.00.....\$ \_\_\_\_\_

### EXHIBIT HALL/COURTYARD SWAP SPACES (includes room vending)

*Two or more vendors may share one swap space, but EACH must be registered for the convention.*

Booth Space "A" - 2 Tables .....\$150.00    \$ \_\_\_\_\_

Booth Space "B" - Includes 3 Tables .....\$210.00    \$ \_\_\_\_\_

Booth Space "C" - Includes 4 Tables .....\$280.00    \$ \_\_\_\_\_

Double End Cap "D" - Includes 6 Tables (Limited availability).....\$390.00    \$ \_\_\_\_\_

ROOM Vending ONLY .....\$ 85.00.....\$ \_\_\_\_\_

*Two or more vendors may share one vending room, but EACH must be registered for the convention.*

*Holiday Inn only - limited availability for those not requiring outdoor or ballroom vending spaces.*

I would like to place a business card ad in the convention publication.

Enclosed is my business card and payment of:.....\$20.00.....\$ \_\_\_\_\_

Half page ad .....\$50.00.....\$ \_\_\_\_\_

Full page ad.....\$100.00.....\$ \_\_\_\_\_

Iowa Gas T-shirts (If unable to attend, please add \$6.50 per order for U.S. Shipping) .....\$15.00 ea...\$ \_\_\_\_\_

M             L             XL             XXL

Pre Registration Amount Paid \$ \_\_\_\_\_

TOTAL ENCLOSED (US bank check or money order (US dollars) payable to "Iowa Gas").....\$ \_\_\_\_\_

*In consideration of the acceptance of my registration for this event, I for myself, my executors, administrators and assignees, do hereby release and discharge the event promoters, officials, sponsors and property owners for all claims of loss, damages, demands, actions what so ever in any manner, arising or growing out of my participation in this event. I authorize the use of my name and/or photo taken at this event for use in any media or any form of publicity and agree to abide by all show policies. If I have exhibitor spaces, I agree not to sell or display merchandise before dawn on Wednesday, and agree to make every reasonable attempt to remain open during advertised event hours.*

Please make checks payable and mail to:

**Iowa Gas Swap Meet**  
**1739 E. Grand Ave.**  
**Des Moines, IA 50316**

**Registration for this event acknowledges your willingness to abide by all Iowa Gas Rules. Unsigned forms will be returned for signature.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

## Show Lodging at the Holiday Inn - 2 Night Minimum

*(This information must be provided and returned with your reservation form.)*

Advanced room rate \$140.00 plus tax. Preferred vending rooms \$160.00. One room per registration. Rate not guaranteed after July 11th.

\*\*\*\* Reservations must be guaranteed with a credit card and the room will be charged to your account if it is not cancelled 24 hours prior to date of arrival.\*\*\*\*

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_ Number of nights \_\_\_\_\_ **48 Hour Notice Required for Early Departure**

Check room preferences:  1 King     2 Queens     Smoking     Non-Smoking    Preferred Room Number \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name as it appears on the card \_\_\_\_\_

\* 200 available rooms assigned in the order received, with preference given to vendors until June 1st. \*