Application & Agreement

Canadian Home Builders' Association of Northern BC
#115, 1705 Third Avenue, Prince George, BC V2L 3G7
Phone: 250 563-3306 **Fax:** 250 563-3815
Website: www.chbanorthernbc.ca
Email: admin@chbanorthernbc.ca

Section One: Contact information, please print neatly and complete all spaces

COMPANY NAME: _____ (Exhibitor)

CONTACT NAME: _____

ADDRESS: _____ CITY: _____ PROV: _____

POSTAL CODE: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

FACEBOOK ADDRESS: _____ TWITTER: _____

WEBSITE: _____ OTHER:

Section Two: Description of Vendor & Space Requested

Booth /Space Preference(s) 1st: 2nd: 3rd:

Full Description of your product or service *as it will be printed in promotional materials and the CHBA Northern BC website (attach an additional sheet if necessary):

Price point range: from $_____ to $_____

☐ Note: all compressed air or liquid gas containers must be anchored to prevent tipping. It is the responsibility of the Vendor to provide secure anchorage. CHBA Northern BC must be notified if using these items. Please initial your understanding.

Section Three: Applicant Requirements

1. 50% of the total funds owing are due now for this application to be processed. The remaining 50% must be paid by March 31, 2017.
2. Applications must be fully completed to be processed; unsigned applications will not be processed. By signing, you acknowledge and agree to follow all rules and regulations as outlined in the 2017 Vendor Package and in the 2017 Application & Agreement.

For office use only:

Date	Deposit Amt. Pd.	Balance Amt. Pd.	Method of Pymt.	Booth Awarded	Notes

INVOICE

Canadian Home Builders' Association of Northern BC
#300, 1705 Third Avenue, Prince George, BC V2L 3G7
Phone: 250 563-3306 **Fax:** 250 563-3815
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Section Four: Vendor & Concession Space Details

	Frontage X Depth	COST: QTY: Sub Total for Space
Indoor Vendor	10'X10'	$875.00 X _____ = $ _____
Outdoor Vendor	20'X10'	$750.00 X _____ = $ _____
Concession	20'X20'	$550.00 X _____ = $ _____

Sub Total for Space: $ _____ (A)

Additional three day passes: $10.00 X _____= $ _____ (B)
*Four 3-day passes are included with each paid space

Cost for Space(s) $_____ A
15% Discount *if paid in full on or **before October 28, 2016** OR 30% Member Discount: $_____(-)
Total owing for space: $_____
Plus Total Passes: $_____ B
Sub Total: $_____ C
5% GST on Sub Total: $_____D
Grand Total: $_____C+D

Less Deposit (50% of G.T): $_____
Balance Owing: $_____

Full Balance is due before March 31, 2017, 5pm

The Vendor/Concessionaire authorizes CHBA Northern BC to process credit card payment: yes _____ no _____

Visa: ____ MC: ____ Number: _____ Expiry: _____ Verification #: _____

Signature for approval of card processing: X_____

Payment amount authorized: $ _____

Cheque is in the mail: _____
*The address to the CHBA Northern BC general office is in the header of this document

I, (the signor below), a representative of the company named on this form, acknowledge that I have fully read and understand all of the Rules and Regulations of the CHBA of Northern BC in the 2017 *Vendor & Concessionaire* Package and in this 2016 *Application & Agreement*

X_____ _____ _____
Signature **Contact Name - please print clearly** **Date**