

Hotel Voucher # _____

Kennedy Productions, Inc.
1208 Lisle Place ~ Lisle, Illinois 60532
Phone 630.515.1160 Fax 630.515.1165
www.kennedyproductions.com kp@core.com

Office Use Only
SDB ___ KIT ___ VDB ___

Application for Exhibit Space in The Old House New House Home Show Date Of Show: _____

Indicate Preferred Booth Locations _____

Space Assigned: _____ # Of Booths: _____ Size: _____ Booth Fee \$ _____

Prices reflect a pre-order discount for orders received at least 30 days prior to set-up. Orders within 30 days of the event must be placed directly with Pheasant Run.

Electric \$100 (for 2000 watts, 20 amp line) Yes _____ No _____ *orders over 2000 watts call for pricing.* \$ _____

Skirted Tables \$50 Each 4' _____ 6' _____ 8' _____ \$ _____

Forklift Service \$75 Yes _____ No _____ \$ _____

Show Program Color Ad Biz. Card (\$100) _____ ¼ pg. (\$225) _____ ½ pg. (\$350) _____ Full pg. (\$500) _____ \$ _____

I plan to run the same ad _____ or submit a new ad _____ Ads must e-mailed as a pdf or jpeg file 6 weeks prior to show.

Additional Complimentary Tickets # _____ (\$3 each) Additional Badges # _____ (\$3 each) \$ _____

Special Service Orders Phone (Dial 9) \$100 _____ Phone (Direct Dial) \$200 _____ Internet \$50 _____ \$ _____

Miscellaneous Fees _____ \$ _____

Sub Total \$ _____

Deposit of \$300 for each 8 x 10 booth must accompany this application. Deposit - \$ _____

Full payment due 6 weeks prior to event. 5% fee applied for late payments. Balance \$ _____

Additional Items Required

- Certificate of Insurance (A current copy from your Insurance provider - we do not need to be named.)
- New Exhibitor Form (first time applicants only.)

Company Information *Please be accurate and specific for appropriate placement on the show floor and in the show program. By providing your contact information you give Kennedy Productions permission to contact you via e-mail and USPS.*

Company Name: _____

Person(s) in Charge of Exhibit: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____ Fax: _____

E-mail: _____ Web Site: _____

Description of Goods/Services (Be specific, include all brands, products, services, etc.) _____

Application becomes rental agreement when signed by both parties. We have read, understand and agree to abide by the terms and conditions on reverse side of this agreement which are part of this agreement between our firm and Kennedy Productions, Inc.

Accepted by X _____ Date _____

Signature of your authorized company representative

Accepted by X _____ Date _____

Signature of Kennedy Productions, Inc.

Thank you for your application. Booths are assigned according to the date application and deposit are received. Deposit must accompany this application to complete registration. Balance must be paid in full 6 weeks prior to event.