

VENDOR & PARTICIPANT CONTRACT & RECEIPT

MAIL CONTRACT & CHECK by JANUARY 4, 2012

PLEASE PRINT ☺ RETAIN COPY FOR YOUR FILES

Name: _____ E-Mail: _____

Organization: _____ Ph./Cell: _____

Check Organization Category Check Booth Type

FEES for Covered Booth Space <i>Includes 1 Table / 2 Chairs</i>	10' x 10'	5' x 10'	WITH POWER		Extra Tables # x \$20/ea.
	"Full"	"Mini"	10' x 10'	5' x 10'	
<input type="checkbox"/> SPONSOR BOOTH	<input type="checkbox"/> \$ 2,000		<input type="checkbox"/> \$ 2,200		_____
<input type="checkbox"/> CORPORATE BRAND BOOTH	<input type="checkbox"/> \$ 800	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 850	<input type="checkbox"/> \$ 550	_____
<input type="checkbox"/> SMALL BUSINESS BOOTH	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 300	<input type="checkbox"/> \$ 550	<input type="checkbox"/> \$ 350	_____
<input type="checkbox"/> NONPROFIT COMMUNITY BOOTH	<input type="checkbox"/> \$ 300	<input type="checkbox"/> \$ 150	<input type="checkbox"/> \$ 350	<input type="checkbox"/> \$ 200	_____
<input type="checkbox"/> PUBLIC AGENCY BOOTH	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 300	<input type="checkbox"/> \$ 450	<input type="checkbox"/> \$ 350	_____
<input type="checkbox"/> FOOD BOOTH <i>(No Beverage Sales) (No Propane Use)</i>	<input type="checkbox"/> \$ 200		<input type="checkbox"/> \$ 200		_____

BOOTH FEE: \$ _____ ADDITIONAL TABLES: \$20/ 8' Table X _____ = \$ _____

TOTAL DUE: \$ _____ Amount Enclosed: \$ _____ Check #: _____

PA System? Do you intend to use a PA System? YES NO

Completed POWER FORM attached? YES NO N/A **POWER FORM DEADLINE: JANUARY 2, 2012**

By signature, Applicant/Vendor agrees to abide by Event rules/regulations, and agrees HAAFA is not responsible for safekeeping of, damage to, or loss of any personal property under control of Applicant. Vendor hereby agrees to hold harmless the HAAFA and the Venue Host, their employees/volunteers from all cost, injury & damage incurred by any of the above, and from any other injury or damage to any person or property, any of which is caused by an activity, condition or event arising out of the performance, preparation for performance or nonperformance of any provision of this agreement by Houston Asian American Festival Association (HAAFA).

Applicant Signature _____ Date: _____

PAYABLE TO:	TEXASIA / HAAFA	IRS Non-Profit ID # 76-0064291	
MAILING ADDRESS:	1714 Tannehill Drive	Houston, TX 77008-1216	USA
CONTACT:	Glenda Joe	<u>GKJ888@comcast.net</u>	[713] 861-8270
FAX NUMBER:	[713] 861-3450	<u>www.LunarNewYearHouston.com</u>	

POWER REQUIREMENTS FORM

LUNAR NEW YEAR HOUSTON

COMPLETE this Form. Without this completed form, your Booth cannot be supplied with POWER!

FAX TO: [713] 861-3450

SCAN TO: GKJ888@comcast.net

- VENDOR / BOOTH NAME: _____
- TELEPHONE: [_____] _____ - _____ EMAIL: _____
- CONTACT PERSON: _____ (please print)

NOTE: "Watts" (W) OR "Amps" / "Voltage" (V) are listed on UL label plate or stamped on most electrical equipment that may be used in booths. (Smaller equipment may only list Watts & Volts (W/V).
• 120 Phase usually lists "Watts" (W). 240 Phase usually lists "Amps".

TOTAL # _____ of APPLIANCES • Indicate TOTAL # Electrical Equipment / Appliances

LIST ALL Equipment Types - i.e., Fryers, Warmers, Heat Lamps, Refrigerators, Computers, CD Players, etc.

1. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

2. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

3. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

4. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

5. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

6. Type of Equipment: _____

Phase 120 Watts: _____ Volts: _____

Phase 240 Amps: _____ Volts: _____

Date: _____

VENDOR / PARTICIPANT Signature: _____