



PRESENTED BY



OUTDOOR EXHIBIT SPACE APPLICATION

CAF AIRSHO 2010

OCTOBER 8-10, 2010

(Please return with signed Vendor Agreement and deposit)

Company: _____ Contact: _____

Address: _____

Telephone Number(s): _____

Email: _____

Static display _____ x _____ @ \$1.50/square foot \$ _____

AIRSHO Square _____ x _____ @ \$3.00/square foot

___4___2 Day passes-FREE \$ ___0.00___

I need _____ additional passes for my staff.

___Electricity 110V* (\$75.00 hookup fee/display) \$ _____

*Limited Availability

Total \$ _____

Please mail Exhibit Space application, deposit, and Vendor Agreement to:

CAF AIRSHO 2010 Exhibits

Attn: Clay Francell

PO Box 62000

Midland TX 79711-2000

Office: (432) 563-1000 ext. 2252 Fax: (432) 563-8046 Email: cfrancell@cafhq.org

Set-up: October 8, 2010 8:30am – 5:00 pm

Exhibition Hours: October 9-10, 2010: Saturday 7:30am-8:30pm; Sunday 7:30am–6:00pm

Payments: 20% deposit due with application, Balance due September 10, 2010

The Vendor will sell/promote the following items: _____

Contract to be approved by AIRSHO Committee:

Committee Member: _____ **Date:** _____