

APPLICATION FOR ARTIST ALLEY SPACE

1. COMPANY INFORMATION: Please Print

Company Name

Display Name (Maximum 20 characters including spaces)

Contact Name

Address

City

Province/State

Postal/ZIP Code

Country

Phone

Fax

Email

Website

2. PRODUCTS: We carry products related to

PRIMARY: Choose one

Comics Sci-fi Gaming Horror Anime

SECONDARY: Choose as many as applicable

Comics Sci-fi Gaming Horror Anime

Please list your products and/or services:

3. SPACE RATES 2019

- STANDARD space consists of 1 - 6' skirted table, 2 chairs, and 2 exhibitor passes.
- PREMIUM space consists of 1 - 5'x12' END CAP space, which includes 2 - 6' skirted tables, 2 chairs, and 2 exhibitor passes.

Standard \$350.00 X _____ = \$ _____

Premium \$745.00 X _____ = \$ _____

Total Space Charge \$ _____

Payment Terms: 100% with application submission

Please Make Cheques Payable To: **INFORMA POP CULTURE
EVENTS INC.**

4. LOCATION:

Placement of Space(s) is at **Show Management's** sole and absolute discretion.

I understand that this is only an application and does not guarantee exhibit space until a contract is issued. Once approved, all payments are **non-refundable** and **non-transferable**. We will review your application and a representative will contact you.

Exhibitor's Signature _____

Date _____

Return this completed form by mail to:

FAN EXPO DALLAS Applications

Informa Support Services, Inc.
101 Paramount Drive
Suite 100
Sarasota FL 34232

Any Questions?

gurmeet@fanexpohq.com
Tel: 416.960.4529

www.fanexpodallas.com

For Office Use Only

Payments	Method	Date	Amount
1.	_____	_____	_____
2.	_____	_____	_____

Booth Size: _____

Assigned Location: _____



Confirmed