

**Specialty Novelty Vendor Application**  
**California International Airshow**  
**October 2 & 3, 2010**

*All applications must be filled in completely and mailed with copy of California resale license and payment no later than August 1<sup>st</sup>, 2010.*

10'x10' Booth  
\_\_\_\_\_ \$900.00

10'x20' Booth  
\_\_\_\_\_ \$1200.00

Special Size  
\_\_\_\_\_ Contact Cheri Carl

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_ E-mail \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

Alternate Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Resale# (Attach Copy) \_\_\_\_\_

Visa/MC # Exp. Date and 3 digit code \_\_\_\_\_

Attach Proof of Insurance: **Please list California International Airshow as Additional Insured**

Number of Booth Selling Sides \_\_\_\_\_ How Many Passes Will be Needed? \_\_\_\_\_

What items will you be selling? \_\_\_\_\_

Attach List if Needed.

Comments section: \_\_\_\_\_

***Booth set up from 8:00 A.M. to 5:00 P.M. Friday, October 1, 2010***  
***Or by 8:00 A.M. Saturday, October 2, 2010***

I understand that I am to supply my own tables, chairs, coverage and signage, and the California International Airshow will not provide me with any electrical power or tie downs. **No cars or trucks may be parked on the field during show hours.** You must provide proof of insurance.

By signing this application I agree to the above conditions and understand that space is limited and the California International Airshow reserves the right to refuse this application. **No refunds after August 1, 2010.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

P.O. Box 1448, Salinas, CA 93902 \* 831.754.1983 Phone \* 831.754.0808 Fax