



Ward Museum/Chesapeake Wildfowl Expo 2017

EXHIBITOR SPACE RENTAL AGREEMENT



This is to serve as an agreement between _____ and the Ward Foundation of 909 S. Schumaker Dr., Salisbury, MD 21804, for the rental of exhibitor space at the Ward Museum/Chesapeake Wildfowl Expo to display and sell decoys, folk art, antiques, and boating, hunting and fishing supplies on Saturday, October 14, 2017 (Friday, October 13, 2017 and Saturday, October 14, 2017 for Indoor Vendors). Exhibitor area is in the front parking lot of the museum and in the Legacy Center\ Henson Education Center.

Outdoor Tailgating Spaces are as follows: One space is equal to two parking areas, Cover, tables and electricity are not available. Set up is at 7 a.m. on Saturday for Outdoor Tailgating Space

Indoor Vendor Space (1- 6 ft. table included, limited electricity)

Set up is at Noon on Friday for Indoor Vendor Space

Breakdown for everyone starts at 4 p.m. on Saturday

All exhibitors are prohibited from parking at the rear of the building.

<input type="checkbox"/> Outdoor Space Saturday 8 a.m. - 4 p.m.	Member No. of spaces _____ x \$25.00 = \$ _____ Non-Member No. of spaces _____ x \$50.00 = \$ _____
<input type="checkbox"/> Indoor Space Friday 3 p.m. – 6 p.m. Saturday 8 a.m. - 4 p.m. <small>(Priority for indoor space will be given to vintage wildfowl collectors if Received by September 1, 2017)</small>	Member No. of spaces _____ x \$75.00 = \$ _____ Non-Member No. of spaces _____ x \$100.00 \$ _____ Membership\$ _____
Due in full with return of agreement	GRAND TOTAL Enclosed = \$ _____

I understand I will be assigned a location as deemed best by the management. By signing this agreement, I agree to protect the Ward Foundation, its Board of Trustees, and its employees, and to save them harmless from any and all claims for damage or suits which may arise from injury as well as loss or damage to property or persons occurring within the retail space I have rented. I also agree the Ward Foundation is not responsible for the safety of my exhibit or any property in the case of loss by fire, robbery, theft, accident, or any other destructive cause or for injury that might occur to me, my employees, assistants, guests, and customers. Additionally, I agree to abide by all decisions of the management made in reference to and in conjunction with said event. I agree that my information will be listed on the Ward Museum web site, and that I must pay in full with return of agreement in order to receive this listing. I understand that I must cancel in writing by September 1, 2017, in order to receive a full refund.

Name _____	MD sales tax no. _____
Business Name _____	Phone (_____) _____
Address _____	Fax (_____) _____
City/State/Zip _____	E-mail _____
Zip _____	Website _____
<input type="checkbox"/> Check if address is NEW	
Describe what you plan to display & sell _____	
Signature Required _____	Date _____
Member ID # _____	

Name Badges: Please print names below as you would like them to appear on badges. Limit 2 per space.

Please make checks payable to the Ward Foundation.
 Return agreement to:
 Shaina Adkins, Director of Special Events
 The Ward Museum of Wildfowl Art
 909 S. Schumaker Dr.
 Salisbury, MD 21804
 (410) 742-4988 Ext. 106
 E-mail: snackins@salisbury.edu

For office use only	
Amt. Recd	\$ _____
Date	_____
Check no.	_____