

APPLICATION & LICENSE AGREEMENT FOR EXHIBITION PARTICIPATION

Sabor Latino 2019

AUGUST 25-27, 2019 LOS ANGELES, CA
LOS ANGELES CONVENTION CENTER - SOUTH HALL



APPLICATION & LICENSE AGREEMENT FOR EXHIBITION PARTICIPATION

EXHIBITOR CORRESPONDENCE (**this is the online contact and individual to receive all SHOW correspondence
Please proofread the information in the area below carefully. All log-in information and passwords for booth furnishings, badges and company listings will be sent to the email address listed below. Only the key contact will have the ability to change the information on this form online should you choose to publish alternate company information online. Contact name and title will not appear in company listing.

COMPANY NAME _____

EXHIBITING AS NAME _____

KEY CONTACT NAME & TITLE _____

E-MAIL _____

ADDRESS _____

CITY _____ **STATE:** _____ **ZIP** _____ **COUNTRY** _____

PHONE _____ **FAX** _____

WEBSITE _____

INSTAGRAM HANDLE _____ **OTHER SOCIAL MEDIA** _____

MARKETING CONTACT _____ **E-MAIL** _____

PLEASE CHOOSE **FOOD & BEVERAGE** **EQUIPMENT** **TECHNOLOGY**

PRODUCT CATEGORY - **DECOR/DESIGN/FURNISHINGS** **SERVICES**

CHECK ALL THAT APPLY **PAPER/PLASTIC/TABLEWARES** **SMALLWARES/MENU/APPAREL**

EXHIBIT SPACE & EVENT MARKETING

BOOTH # LIST 3 CHOICES 1 _____ 2 _____ 3 _____

- 10' X 10' - SPACE ONLY - NO FURNISHINGS**
- 10' X 10' -WITH FURNISHINGS (ONE 6FT TABLE, TWO CHAIRS, CARPETING, WASTEBASKET & LEAD RETRIEVAL APPLICATION**
- TABLE TOP - FTE/BEV/HEXPO**
- OTHER**

PLEASE NOTE: CORNERS ARE \$500 ADDITIONAL, PENINSULAS ARE \$1000 ADDITIONAL
ISLANDS ARE \$2000 ADDITIONAL

ARE YOU SERVING FOOD? PLEASE NOTE THAT THE COUNTY OF L.A. ASSESSES A CHARGE OF \$51 FOR LA COUNTY HEALTH DEPT. FEE, IF PAID AFTER AUG 1, 2019, THE CHARGE INCREASES TO \$101 - ALSO SAMPLING AREAS NEED TO COMPLY WITH ALL LA COUNTY HEALTH RULES



TOTAL PRICE _____

PAYMENT TERMS, SCHEDULE AND CANCELLATION POLICY:
WITH APPLICATION - 30%
BY APRIL 15, 2019 - 100%

CANCELLATION, WITHDRAWAL, DOWNSIZING & DEFAULT SCHEDULE FOR LIQUIDATED DAMAGES: PRIOR TO APRIL 15, 2019 - 30% - ON OR AFTER APRIL 15, 2019 - 100%

Contract Acceptance: The person(s) signing this document expressly represents and warrants to Management that he/she is authorized by Company to execute this License Agreement. The person(s) also acknowledges that he or she has read and accepted the rules and regulations as south forth on all parts of this agreement (page 2 contains rules and regulations and terms and conditions) and that she/he fully understands the description of the Booth Service Package as selected above.

NAME _____ **TITLE** _____

SIGNATURE _____ **DATE** _____