



**VARIETY DISTRIBUTORS 2011 ANNUAL NATIONAL SHOW  
Show Fee Invoice**

**Keep A Copy  
Of This Page  
For Your Records**

Please print this page, complete & return by mail, email or fax to: 712-733-5299

Your Company Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

Please Print Legibly

Quantity	Description	Cost per Booth	Extended Cost
	End Cap Booth (12 Available)	\$1,500.00	
	Power Aisle Booth (19 Available)	\$1,400.00	
	Standard Booth (153 Available)	\$1,300.00	
		<b>Booth Fees:</b>	
	Additional Lunch Friday (1 free lunch/ booth)	\$ 13.80	
	Additional Lunch Saturday (1 free lunch/ booth)	\$ 13.80	
	Sponsor Welcome Meeting Appetizers	\$ 100.00	
	Sponsor Friday Buyers Breakfast	\$ 250.00	
	Vendor Breakfast Presentation	\$ 200.00	
	Sponsor Daily Beverages	\$ 50.00	
	Sponsor Friday Lunch	\$ 250.00	
	Sponsor Friday Casino Shuttle	\$ 100.00	
	Sponsor Saturday Lunch	\$ 250.00	
	Sponsor Sunday Continental Breakfast	\$ 150.00	
	Sponsor Lodging for Stores	\$ 100.00	
		<b>Additional Fees:</b>	
		<b>TOTAL FEES:</b>	

**Show Registration Contract**

I hereby contract for booth space and additional booth accessories as noted herein for the 2011 Variety Distributors Annual National Show on April 14-17, 2011. I agree to pay all fees assessed by Variety Distributors in accordance with this contract and I understand that any non-payment will result in a claim against the factory line(s) I represent at this Show. Show fees not paid by the due date of March 18, 2011 may incur a 1½% per month service charge for each month that the fee remains unpaid. I understand that I will be unable to move-in or set my booth(s) if Show fees are not paid by Show date. I further agree to be in my booth during the Show hours (except for reasonable brief intervals for food or personal needs) until 12:00 PM Central Daylight Time on April 17th; not to move-out prior to announced Show closing; to bill all Show orders with VDI Members/ Non-Equity Member stores through Variety Distributors; and to comply with Venue and Show Management requirements and regulations. Early departure will result in a \$250 penalty.

Signature ( Required ) \_\_\_\_\_

\_\_\_\_\_ Date

**Please Indicate How You Will Pay Your Show Fees**

- Check. We will only accept one check, payable to Variety Distributors, Inc. 609 7th St. Harlan, IA. 51537
- Credit Memo(s). How many CM's will you use? \_\_\_\_\_ Subject to Buyer Approval
- Credit Card. Complete the information below.

**Payment Due March 18, 2011**

Please check your choice of Credit Card Payment:

VISA                       MASTER CARD

Month Year  
        
 Expiration Date

Verification Value (Req)

Last 3 digits on back of Card

                      
 Account Number

Please Print or type legibly. Name(s) on Card: \_\_\_\_\_

Billing address of Card Street Address \_\_\_\_\_

City, ST. Zip \_\_\_\_\_

Signature (Required): \_\_\_\_\_