



**AUGUST 11-12, 2017**  
CAESARS WINDSOR, Windsor, Ontario

**Application for ARTIST ALLEY exhibit space**

**REGISTRANT:**

Company

Display Name (Maximum 20 characters including spaces)

Contact

Street Address

City Province/State

Postal/ZIP Code Country

Phone

Email

Website

**LOCATION:**

Assignment of booth location(s) and space(s) is at promoter's discretion.

I understand that this is only an APPLICATION and a ComiCon representative will contact me to discuss arrangements. Exhibit space is not assured until a contract is issued. Deposits are non-refundable.

\_\_\_\_\_

Authorized Exhibitor Signature

\_\_\_\_\_

Date

**OUR PRODUCTS relate to:**

PRIMARY

Comics  Sci-Fi  Gaming  Horror  Anime

More about your products and services

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTIST ALLEY RATES 2017**

**STANDARD TABLE**

Each Artist Alley Standard Table includes: 1x 6' table, 2x chairs, 2 x exhibitor passes

**PREMIUM END CAP**

Each Artist Alley Premium Space includes: an end cap location, 2 x 6' tables, 4 x chairs, 4 x exhibitor passes

STANDARD TABLE \$175. ea. x \_\_\_\_\_ = \$ \_\_\_\_\_

PREMIUM END CAP \$350. ea. x \_\_\_\_\_ = \$ \_\_\_\_\_

Sub-Total = \$ \_\_\_\_\_

H.S.T. (13% Tax) = \$ \_\_\_\_\_

Total Booth Space Charge = \$ \_\_\_\_\_

**PAYMENT TERMS:**

**100% of fee is to be submitted with your application.**

Total Due \$ \_\_\_\_\_

**CREDIT CARD PAYMENTS**

**ADD 3%**

Service Charge Adjusted Total

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Payments can be made via Interac e-Transfer or Credit Card.

**ADMINISTRATION USE ONLY**

Booth Size: \_\_\_\_\_

Assigned Location: \_\_\_\_\_

**Return this completed application to:**

Customer Service: info@windsorcomicon.com

**WE RESERVE THE RIGHT TO LIMIT SPACE.**