

Main Exhibit Area

2012 Lewis & Clark Home Builders Association *Exhibitor Registration Form • April 14 – 15, 2012*

Name of Exhibiting Firm: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Phone (Work): _____ (Home) _____ (Cell) _____

Fax Number: _____ E-mail Address: _____

Current South Dakota Sales Tax License Number: _____

Complete description of business, products, or services: _____

The Lewis & Clark Home Builders Association and the Kiwanis 4-H Ice Center disclaims any and all liability for any and all statements or claims made by exhibitors regarding their products and/or services. I hereby certify that I have read the Exhibitor's Manual including Exhibitor's Policies and Procedures, and I understand said policies and that I agree to conform to all the rules and regulations as stated, and further agree that my employees and/or agents will be informed of the policies and that they will observe and comply with the policies and procedures.

Authorized Signature: _____ Date: _____

Full payment and proof of insurance must accompany registration
Deadline: February 29, 2012

\$25.00 Early Registration Discount through January 31, 2012

Indicate the number of booths desired and total amount due for:

	<u>LCHBA Member Rate</u>	<u>Non-Member Rate</u>
All Aisle Booths, 10' x 10' _____ @	\$225.00	\$275.00
Corner Booths, 10' x 10' _____ @	\$275.00	\$325.00

Total Amount Due

Limited space available...first come/first serve basis!

Electrical Needs: Yes, I need electricity (Add \$5 to entry fee for electrical inspection)

No, I do not need electricity

For more information, contact Steve Kirby of the LCHBA office at 605-661-7215 or Gerry Rupiper at 605-661-9704.

Make Checks Payable to:
Lewis & Clark Home Builders Association
Complete Registration Form and Certificate of Insurance and Mail to:
Lewis & Clark Home Builders Association
P.O. Box 582, Yankton, SD 57078
E-mail: lchomebuilders@iw.net
Fax: 605-260-8526

PLEASE COPY THIS REGISTRATION FORM FOR YOUR RECORDS!

For Office Use Only:

Amount Received: \$ _____ Date Received: _____ Check #: _____