

36th Annual TRADE SHOW & EXHIBITION

Kindersley West Central Events Centre
Inter Pipeline Arena

500 2nd Street East

June 12 & 13, 2025

Exhibitor Application

The Kindersley & District Chamber of Commerce invites you to a 2-day opportunity to show the world what you do, how you do it, or just promote it! Patrons of the Trade Show are treated to a variety of products and/or services for new clients and customers.

The Kindersley & District Chamber of Commerce Annual Trade Show & Exhibition is built to motivate businesses to promote their products and services.

Phone: (306) 463-2320 • office@kindersleychamber.com • www.kindersleychamber.com

Exhibitor General Information

Please maintain this page for reference purposes.

TRADE SHOW DATES & TIMES

Thursday, June 12 1:00pm - 9:00pm Friday, June 13 11:00am - 7:00pm

EXHIBITOR SETUP TIMES

Wednesday, June 11 3:00pm - 9:00pm Thursday, June 12 9:00am - 12:00pm

DISPLAYS - Booth Display Setup By: Town of Kindersley

ALL Booths are 8' x 10'

1-8' table

2 - stacking chairs

1 - electrical outlet - 110v 15amp outlet

If additional electrical service is required, it can be provided at an **extra charge**. Please provide details of your electrical requirements and check the box on the application if you wish to purchase extra electrical service.

PLEASE INDICATE ON THE APPLICATION:

- If you require extra electrical outlets
- The number of tables and chairs you need for your booth if other than what is included

PLEASE READ: IMPORTANT INFORMATION FOR ALL VENDORS

- All applications must be filled out completely and signed and dated.
- All payments must be received in full, included with application. Payments will not be accepted at the Trade Show.
- Subletting and/or sharing of booth space must be pre-approved by event management in writing.
- All vendors must park their vehicles and/or trailers in designated areas during Trade Show hours of operation.
 - Please do not block doorways and exits.
- Trade Show organizers and/or facility management reserve the right to reject, limit or prohibit products, demonstrations or exhibits considered unsafe or inappropriate to an all-ages show.
- Trade Show organizers and/or facility management reserve the right to relocate exhibits and/or exhibitors to maintain the character and/or good order of the show.
- Exhibitors are not allowed to take down displays until closing time Friday at 7:00pm

<u>INSURANCE AND LIABILITY</u>: All exhibitors must carry liability insurance coverage. A copy of the insurance policy must accompany and privilege contract and/or application for exhibiting.

RACKS & DISPLAY SHELVES: All racks and display shelves must not exceed 8ft in height and 3ft on the sides. The exhibitor is required to exercise care so that the displays do not unduly obstruct visibility of adjacent booths, as per the good neighbour policy.

<u>SECURITY:</u> Security will be provided after show hours. However, it is suggested that exhibitors use their own discretion in packing away valuables.

The venue is a SMOKE-FREE facility.

CONFIRMATION OF BOOKING WILL BE EMAILED UPON RECEIPT OF APPLICATION AND PAYMENT.

CANCELLATION POLICY: Cancellations must be made in writing and mailed or emailed to the Chamber of Commerce no later than May 01, 2025. Exhibit space rental will be refunded (less \$50.00 administration fee) provided cancellation notice is received as indicated. No refunds will be paid after May 1st, 2025, or on vendors who do not attend on the show dates.

RECEIPTS WILL BE DISTRUBUTED AT THE TRADE SHOW.

For further information or questions please contact:

Phone: 306-463-2320 Email: office@kindersleychamber.com

Please complete and return the next 2 pages:

(PRINT clearly, sign all applicable areas)

1. Mail: Kindersley & District Chamber of Commerce

Box 1537, Kindersley, SK, SOL 1SO

2. Email: office@kindersleychamber.com

20	19 Overhead D	900r 18 17	Exit	Please read this form carefully and print or type all information.			
21				Booth Si	ze:	(8x10, 8x20, 8x30, 8x40)	
22	88 87	58 57	16				
23	89 86	59 56	15	Corner B	ooth: Yes/No	**Extra \$50 charge **	
24	90 85	60 55	14				
25	91 84	61 54	13	Power: Y	es/No	**110v 15amp outlet**	
26	92 83	62 53	12	*Dlogso	indicate if you require	a overa autlate and how many in total	
27	93 82	63 52	11	*Please indicate if you require extra outlets and how many in total.			
28	94 81	64 51	10	t	otal outlets required.	•	
29			9	4.01			
30	95 80	65 50	8	1 st Bootr	Choice: #		
31	96 79	66 49	7	2nd Bootl	h Choice: #		
32	97 78	67 48	6	2 5000	11 CHOICE. #		
33	98 77	68 47	5	3 rd Booth	n Choice: #		
34	99 76	69 46	4				
35	100 75	70 45	3	Please ch	neck here if you do n	ot have a preference	
36	101 74	71 44	2				
37	102 73	72 43	1	How ma	ny chairs do you requ	uire? (more than 2 – charge of \$10/chair)	
				How ma	ny tables do you requ	uire? (more than 1 – charge of \$20/table)	
Exit	38 39 40	41 42	Entrance				
Company	/ Name -						
Contact I	Name -						
Street/Bo	ox # -						
City/Town -					Postal Code -		
Contact Phone # -					Email -		
Website	-						

Exhibit information (please be **SPECIFIC). Only products listed may be sold or displayed at your exhibit. If this space is not filled out, your application will remain incomplete. To prevent vendor duplication please provide a <u>detailed</u> product list (including brand names if applicable). If approved by the committee, these will be the only items permitted in your booth. List on a separate sheet if needed.

Type of product(s) displayed: ______

Please Check Appropriate Box	Booth Pricing		
☐ Kindersley Chamber Member	\$280.00		
□ Non-Member	\$380.00		
☐ Non-Profit Organization*	\$125.00		
☐ Home-Based Business	\$125.00		
Premium Booth* Pricing	Please see below for Premium Booth Restrictions		
☐ Kindersley Chamber Member	\$330.00		
□ Non-Member	\$430.00		
Extras			
☐ Additional Booths	\$225.00		
☐ Extra Electrical Service Required	\$30.00		

^{*}Premium Booth Restrictions: Premium booths are not available to Non-Profit organizations or Home-Based businesses. (Premium booths are not eligible for additional booth pricing and will face outward towards the ends of the aisles)

Extras: Amount Paid:	Method of	Payment In	voice #:	
	ment Informati	on		
	Office Use Only			Booth Assignment
Signature:			Date:	
All applications must be signed and	d dated.			
Signature:			Date:	
list my business information as I entered	it above for ad	vertising pu	rposes.	
PIPEDA (Please Print) I, give				mission to refer to and/or
Amount Enclosed:				
Cheque #:				
☐ Cheque: Make Cheques Payable to: Kindersley & GST# 107569279	District Chaml	ber of Comr	nerce	
☐ E-transfer: E-transfers can be sent to office@kinder Email Adress and Name of sender:				
.,	- · · ·			
Method of Payment Please check and fill the applicable section	on.			
		=		
Additional Chairs @ \$10.00	Subtotal	=		
Additional Tables @ \$20.00			(one included)	
Additional Electrical Service @ \$30.00)	=	 (one included)	
Corner/Premium Booth @ \$50.00 Additional Booth @ \$225.00		=		
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