Southeastern Retail Bakers Association
4737 Glenwood Ave., Jacksonville, FL 32205 (985) 503-SRBA (7722)
E-mail seretailbaker@gmail.com

EXHIBITOR'S CONTRACT - *THIS IS A SHOW & SELL HOLIDAY SHOW!*

SRBA'S 2015 SEPT. 12 - 13 BIRMINGHAM, AL CONVENTION
VIRGINIA COLLEGE'S CULINARD SCHOOL
PALISADES CENTER, 436 PALISADES BLVD, BIRMINGHAM, AL 35209
VENDOR SHOW HOURS: SAT., SEPT. 12 - 12 NOON TO 3PM / SUN., SEPT. 13 - 12NOON TO 4PM
LOAD IN: TBA LOAD OUT ON SUNDAY: 4 PM

THE UNDERSIGNED EXHIBITOR HEREBY APPLIES FOR _____ TABLETOP BOOTH, WHICH CONSISTS OF **ONE** 6 ft. TABLE (ADDITIONAL TABLES $50) and YOUR COMPANY NAME ON A TABLE SIGN. PLUS IF YOU REGISTER BY AUGUST 21, YOU RECEIVE TWO FREE LUNCHES.

NAME AND ADDRESS OF COMPANY:

_____

_____

_____

(____)_____**E-MAIL**_____

NAME OF CONTACT PERSON:

(INCLUDE ADDRESS & PHONE IF DIFFERENT)

_____

_____

(____)_____**E-MAIL**_____

NAME OF PERSONS WORKING BOOTH (to receive **free lunch** you must register by August 21 – otherwise $15 at door)

_____ _____

TOTAL AMOUNT DUE FOR BOOTH/S:

1st BOOTH – MEMBER* (Current) $ 350 = $ _____
1st BOOTH – NON-MEMBER $ 450 = $ _____
_____ ADDITIONAL TABLES @ $ 50 ea. = $ _____
_____ TABLECLOTHS @ $ 15 ea. = $_____
Donation to the Bob Freeman Baker's Education Scholarship Fund - $_____

***No charge for booths if you are a SRBA Sponsorship Participant. Call Sandy at the SRBA Office for more info.**

NEW SRBA MEMBERSHIP – pay the amount for the month you join; membership expires Dec 31, 2015 **OR** pay $100 and become a SRBA member NOW with your Membership good through 2016!

August / September Membership - $40 = $_____ 2015/2016 Membership - $100 = $_____

TOTAL FOR BOOTH AND MEMBERSHIP = $_____

Our company would like to contribute _____ to the Door Prizes that will be given on Saturday and Sunday. You will also be given credit in the program and on signage at your booth. ***Thank you!***

PLEASE MARK IF APPLIES: _____ **Yes,** we will need electricity. **(Limited – Apply Early!)**
_____ Yes, we will be using a backdrop (supplied by vendor)

EXHIBITORS SIGNATURE _____ **DATE**_____
(Signature implies compliance with Contract Provisions**)** (SRBA'S Federal Tax I.D. #5812321117)

WOULD YOU LIKE TO PAY YOUR CONTRACT BY CREDIT CARD? WE NOW ACCEPT PAYMENTS THROUGH SQUARE.
https://squareup.com/market/southeastern-retail-baker
Your receipt will be emailed to you. We gladly accept Company Checks by mail.
You can call the SRBA Office directly to pay by credit card if you prefer.