

GRAND NATIONAL MARKETPLACE

VENDOR SPACE REQUEST

GRAND NATIONAL RODEO

COW PALACE - SAN FRANCISCO, CA

PRCA RODEO PERFORMANCES - OCT 16-17 & 23-24
 Vending: Oct 16-17 & 22 • Rodeo and Livestock show Oct 23 & 24
 Please retain a copy for yourself and return form to:
 Grand National Rodeo • 2600 Geneva Ave, Daly City, CA 94014 • Fax: 415.337.0941

VENDOR CONTACT INFORMATION

Company Name		Contact Name/Title	
Address			
City	State	Zip	
Phone	Fax		
Website:	E-mail		
Tax ID or Resale Number	Certificate of Insurance Enclosed <input type="checkbox"/> Yes <input type="checkbox"/> No		

BOOTH INFO PRODUCTS AND DISPLAY

10 X 10 = \$ 450.00 10 X 20 = \$ 550.00 10 X 30 = \$ 650.00 20 X 20 = \$ 700.00 20 X 40 = \$ 950.00 20 X 60 = \$ 1400.00 Corners = Add \$ 100.00	Please describe the products you will be selling and your display below. Please attach photos of your booth. _____ _____ _____ _____ _____ _____
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Quantity	Booth Description (i.e. 2 - 10 x 20)	Price	
			\$.00
RV Parking Space Reservations: To reserve RV Spaces, please include a check or money order for \$100 per space made payable to the Cow Palace. The RV Space(s) are located in the lower livestock area. RV SPACES DO NOT INCLUDE HOOK-UP. Total Spaces requested are _____			\$.00
TOTAL AMOUNT ENCLOSED			\$

INSURANCE REQUIREMENTS

Insurance Requirements: An Original Certificate of Insurance with the proper additional insured statement OR a \$135 Cashiers Check or Money Order made payable to C.F.S.A. must accompany this contract. Please mark your chosen option ->	<input type="checkbox"/> Certificate of Insurance <input type="checkbox"/> C.F.S.A Payment
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Payment Information

Method of Payment: <input type="checkbox"/> Check/Money Order enclosed Charge to: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> AMEX	
Cardholder Name:	
Card Number:	Exp Date
Billing Address & Zip Code:	
Authorized Signature:	

This reservation form is not a contract. Please complete the form and submit with check or credit card payment authorization in the amount of the total by September 1st. If your application is rejected, your payment will be refunded.
 Questions should be directed to KC Andersen at Kandersen@cowpalace.com or 415.404.4117
 * A \$35.00 return check charge will be applied to all returned checks.

OFFICE USE ONLY

DATE REC'D:	BALANCE DUE \$
APPLICATION COMPLETED	DATE: