

MISCON 26 MERCHANT APPLICATION

Dealer name: _____ Business name: _____

Mailing address: _____

Business phone number (inc. area code): _____

Business email: _____

Business website: _____

Special needs (e.g., electricity): _____

Products & Services (check one):

Retailers: Books Weapons Toys/Collectibles
 Jewelry Art Other _____
 Gaming DVDs
 Costumes Clothing

Non-profit organizations: Merchandise sales
 Information booth only (will not be located in Merchants' Room)

Please describe your merchandise: _____

***Note:** MisCon reserves the right to select and limit types of merchandise for sale in the merchants' room.

Check if OK to list business name, city/state, phone #, website, and merchandise description in the MisCon Program.

Exhibit space rates: \$75 per table (30"x8'), includes 2 MisCon memberships

Exhibit space cost: _____ tables at \$75 each for a total of \$_____ (**Max 2 tables per merchant**)

Exhibit space request: (See map on next page & list table number choices in order of preference)

1. _____ 2. _____ 3. _____

*** NOTE: This is a request only.** All space will be assigned by MisCon. Every attempt will be made to accommodate exhibitor requests; however, MisCon reserves the right to modify the floor plan to serve the best interests of the convention. Such modifications do not relieve exhibitors of contracted liability. MisCon decisions concerning exhibitor space assignments are final and binding.

Membership Badge Names (2 memberships/table):

1. _____ 2. _____

3. _____ 4. _____

I have read, understood, and agreed to the MisCon Merchant Application and MisCon Merchants Policies.

Signature: _____ Date: _____

Print Name: _____

MisCon 26 Merchants' Room Map

