

Vendor Registration

South Dakota Women's Expo

Saturday, October 14, 2017 9 am - 4 pm

Company Name: _____ Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Fax: _____ Email: _____

Booth Prices (No refunds on this event)

Includes One (1) Table, Two (2) Chairs, Electricity, Drapery, Two (2) Exhibitor Passes, and Lunch

Early Bird Savings— Ends June 30, 2017

Single Booth: 10x10 \$150
Double Booth: 20x10 \$225
Non Profit: Single \$100

Standard Vendor Expo Pricing

Single Booth: 10x10 \$175
Double Booth: 20x10 \$250
Non Profit: Single \$125

Product/Service: _____

Electricity Required: Yes / No (Please circle) Exhibiting or Selling? _____

Will you be conducting demonstrations at your booth? Yes / No If yes, please describe demonstration:

VIP Pampering Perks Package: You are invited and encouraged to be part of the **VIP Pampering Perks Package**. If you choose to participate you will be listed on a **VIP Pampering Perks Card** and your booth will also be recognized with **VIP special signage**. You will be required to purchase 150 items to hand out to the ladies that purchase a VIP ticket. (Coupons are not accepted) A member of the Women's Expo Board will be contacting you by August 15, 2017 for your contribution. This will drive the 150 VIP's to your booth to help boost your sales at the event. New this year all VIP ladies that make a purchase at your booth will receive from you double tickets to enter into our drawing for the beautiful gift baskets to be given away throughout the event.

_____ **Yes, Include me in the VIP's Pampering Perks!**

_____ **No thank you!**

We are asking each SD Women's Expo Vendor to contribute one (1) item that we can include in a BIG Vendor Basket. We are creating six (6) of these baskets which our ladies can register for. The lucky winners will be drawn at 3:00 pm on Saturday.

Please return applications to: SD State Fair · 1060 3rd St. SW Huron, SD 57350 · Attn: Joni · Direct Dial: 605-353-7353
Fax: 605-353-7348 · Email: joni.kiple@state.sd.us

Date: _____ CK# _____ CC# _____

Exp. Date _____ 3 Digit Pin: _____ __VISA__ MC __DISC