



**New Moon Psychic Faire & Whole Life Expo
October 23 & 24, 2010 at the Dome Center
Reader Booth Application**

BUSINESS NAME: _____
NAME OF CONTACT: _____
MAILING ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____ **PHONE:** _____
EMAIL: _____ **WEB SITE** (we will include a link to your site): _____
 Type of Business: *(please print clearly, describe your services)*

Description	Amount	Total
Single Booth: <ul style="list-style-type: none"> • 8 x 10 space • 1 six-foot table / 3 chairs • Electricity now included in fee 	\$425 per booth	
Additional Chairs _____	\$5 each additional	
Table Skirting (all tables must be covered/skirted to floor length; please indicate if you will bring your own or if you need us to provide it)	\$10 per skirt	
Display Ad in Expo Guide (provide electronically as .jpg, .gif or high-res PDF)	\$55 – single business card size \$75 – double business card size	
TOTAL DUE:		

PAYMENT TERMS & SCHEDULE: A \$100 NON-REFUNDABLE FEE IS INCLUDED IN YOUR BOOTH COST. Deposits due January 15, 2010. Full payments due by June 1, 2010.

PAYMENT METHOD:

- _____ **Check** Payable to New Moon Psychic Faire & Whole Life Expo
 (A \$30 fee will be assessed to all returned checks)
 _____ **PayPal/CC** Go to www.newmoonpsychicfair.com/exhibitorforms.htm
 (Please still send in completed application)

For Office Use

I have read and understand the terms of this application/contract.

 Signature Date

Additional Opportunities:

- _____ Are you interested in providing a free 30- to 45-minute lecture or demonstration during the expo? Title _____
 _____ Donate Door Prize(s) - please specify _____

Please list the names of all people who will be working in your booth:

1. _____
 2. _____

To reserve your space, you need:

1. Booth application, filled out & signed
2. Policies & Procedures, signed
3. Payment (enclose check OR use PayPal on our web site)
4. Tax certificates (2 copies) if selling products.

Mail all items to:

New Moon Psychic Faire & Whole Life Expo
 31 Tottenham Road, Rochester, NY 14609

Questions should be directed to:
 Barbara Konish 585-224-8657