

Healthy Preventions Wellness Expo

5K walk Education Exhibits

Space description:

10x10 booth space (electric is available. 1st come 1st served)

Acceptance procedure: All exhibitors that have been accepted will be listed on our website www.HealthyPreventions.info. All spaces are 1st come 1st served. A completed application with payment will secure the space. Miller Promotions cannot hold spaces.

Set up info: Set up time is the night before your scheduled day at 8:30 pm, or 8 am. – 10 am. prior to the start of the event. Each exhibitor is responsible for his or her own space set up. All exhibitors must be equipped with their own dolly.

Tear down info: Tear down time is when the mall closes the day of the event you are completing. Any vendor packing up early will be banned from future events by Miller Promotions

Important vendor details: Exhibitors are purchasing frontage space. (10x10 booth space) Vendors cannot use any space other than what is rented. If a vendor needs or wants walk space around their space, then they must rent additional space. The space will be measured out, and enforced.

Vendors must have: Table covering touching the floor for the front of their table. Exhibitors renting spaces with electric will need an extension cord and a power surge cord if the exhibitor has a need for multiple plugs. The space does not include a table or chairs. A vendor may rent a table for \$15 and cloth for \$10

Mail application to: Miller Promotions, 248 Allison Ave., Pittsburgh, Pa. 15202
Email it: MillerPromotions@comcast.net phone: 412-415-3584 fax: 412-415-1315

This application serves as a contract for exhibiting at the scheduled Healthy Preventions Expo. Upon acceptance, vendors in the event will be held to the rules and guidelines listed in this contract. Please read carefully and retain a copy of the application/contract and conditions of the show for your record

Refunds: Registrations is a commitment to the show. NO REFUNDS! NO EXCEPTIONS! Once your application has been received, no refunds will be honored. This also applies to no shows, late arrivals to the show, illness, family circumstances, and any type of request for refund. Spaces can be resold with the approval of the show promoter. **A \$45 NSF fee will be charged for each check returned. All cancelled checks will be filed with the magistrate.**

Rules of the Show

1. Your booth must stay open during all mall hours. Generally hours are Fri–Sat from 10am to 9pm and Sunday from 11am to 6pm.
2. Exhibitors provide their own props and other display items.
3. Maximum display height is 6’6”.
4. The backside of your display must have a finished appearance, if you are building a booth in your space.
5. All boxes, cartons, trash, coats, and inventory should be stored out of sight.
6. Early teardowns are NOT permitted. Vendors doing so, are not permitted to do any future shows through Miller Promotions.
7. Exhibitor attire should be professional looking. Collared shirts, blouses, and casual pants are preferred. No shorts, t-shirts, or flip flops allowed.

Important vendor information:

- Rubber tips or mats must be used under metal displays.
- Use painter's tape to cover any electrical cords
- Rubber wheeled dollies should be used.
- Exhibitor's booth must not interfere with adjacent exhibits, extend into the aisle in any way, or occupy any space other than the specific rented size.
- All exhibitors must follow additional rules set by mall management.
- The mall management reserves the right to remove any vendor that does not meet mall management requirements.
- Exhibit booth must be manned at all times.
- Exhibitors are solely responsible for unloading, erection of display, and removal of exhibit.
- Set up will only be allowed before the mall opens, or after it closes. Any exhibitor attempting to set up during mall hours will be expelled from the show immediately.
- The show promoter, the mall management, and all of its agents are not responsible for lost, stolen, or damaged, merchandise of exhibitor.
- The Gift and Craft Expo(s), Miller Promotions, and any of its coordinators and agents, will not be liable for refunds or any other liabilities whatsoever for the failure to fulfill this contract due to reasons of the enclosure in which the show is produced, being before, or during the show is destroyed by fire or any other calamity, act of God, public enemy, strikes, ordinances, or legal authority, or any other act beyond the control of the coordinators which make it impossible to hold the show.
- Exhibitors are responsible for their own insurance and should provide proof of insurance. Failure to secure insurance will make the exhibitor liable for any claims or suits held against them by the customer or people attending the event. Exhibitor accepts this liability when participating in this show.

Certificate must list *Susan Miller dba Miller Promotions is named as an additional insured*

Vendor keeps PAGE 1, makes a copy of PAGE 2 & 3, then sends original page 2 & 3 to office.

Sales rep name _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business#: _____ E-mail Address: _____

Website: _____

You company Facebook link: _____

Special needs: _____

Event pricing: Sat @ \$100 Sun @ \$70

Sunday vendors have the option to do a mini educational lecture. You will be given 30 minutes to educate and answer questions. If you are participating as one of our speakers, please provide the name of your lecture and a brief overview.

Name of lecture _____

Lecture description _____

BOOTH PRICING

Sat _____, Sun _____, = Subtotal _____

if needed, add # of 8' table rentals @ \$15 ea. _____

if needed, add table cloth rental at \$10 ea. _____

Check appropriate box:

() Checks enclosed (payable to Miller Promotions)

() Send virtual invoice to my email address _____

() Please charge my credit card (Visa/Mastercard/Discover) Receipt will be sent to your email address.

_____ ExpirationDate _____ Credit Card Code (CVV/CVC) _____

Billing zip code _____

Please initial each statement below:

- I understand that the show promoter, the mall management, and all of its agents are not responsible for lost, stolen, or damaged, merchandise of mine. Please initial _____
- I understand that the Healthy Preventions Wellness Expo, Miller Promotions, and any of it's coordinators and agents, will not be liable for refunds or any other liabilities whatsoever for the failure to fulfill this contract due to reasons of the enclosure in which the show is produced, being before, or during the show is destroyed by fire or any other calamity, act of God, public enemy, strikes, ordinances, or legal authority, or any other act beyond the control of the coordinators which make it impossible to hold the show. Please initial _____
- I understand that I am responsible for my own insurance and I should provide proof of insurance. Failure to secure insurance will make me liable for any claims or suits held against me by the customer or people attending the event. I accept these liabilities when participating in this show. Please initial _____

RELEASE and ACCEPTANCE General Release and Acceptance of Rules - This contract is for the Healthy Preventions Expo to which exhibitor applies or is accepted. I, the applicant, have read the "Conditions of the Show" of this licensing application/contract and agree to abide by said conditions. In addition, I, the applicant, do expressly release the staff and owners of the Healthy Preventions Expo, and Miller Promotions, the mall or it's agents, of and from any and all liability for any damage, injury or loss to any person, business or property which may arise from the licensing and occupation of the exhibit space by the applicant, and agree to hold and save Miller Promotions harmless of any damage, injury or loss by reason thereof.

I understand that if this application/contract is not accepted, booth fees will be returned. If this application/contract is accepted, I give permission to use my name, business name, photos, item prices, and any photographs, videotape, or images taken of me or any items for any and all purposes. If accepted, I authorize my credit card listed above to be charged all fees.

Applicant Signature: _____ Date: _____