ENTRY FORM

KAW VALLEY WOODCARVERS 39TH ANNUAL SHOW & SALE

NOVEMBER 17 -18, 2018

TOPEKA RAMADA DOWNTOWN, 420 E. 6TH AVE.

TOPEKA, KANSAS 66604

***EXHIBITOR**_____

NAME TAGS: _____

PLEASE **PRINT NAME(S) OF IMMEDIATE FAMILY MEMBERS YOU ARE REQUESTING A NAME TAG FOR**

ADDRESS_____

CITY_____ **ZIP**_____

PHONE_____ **EMAIL**_____

AN EMAIL ADDRESS INSURES THAT YOU WILL RECEIVE PERIODIC ADVANCE COMMUNICATION(S).

***ENTRY FEE IS $50.00 PER 8' TABLE / SPACE ($25 FOR ½ TABLE)**

NO. OF TABLES/SPACES NEEDED _____

ELECTRICAL SERVICE - $10.00 _____

Kansas Tax Number_____ **Total Fee**_____

Please assign table where backdrop may be used……. Yes____ No_____

Preference for Table Assignment Yes ____ No _____ _____

Ramada should cover all tables but we encourage you bring your own throw and skirting if desired.

In case of emergency we should contact :_____

Liability: It is agreed that the exhibitor shall make no claims of any kind against the Kaw Valley Woodcarvers' Association or any member of the Association. Under no circumstances will the Association be responsible for loss or damages, destruction or theft of any displays or goods of the exhibitor, or injury to the exhibitor or their employees while attending the show. I certify that I understand and agree to abide by the rules and regulations for the KVW Show and Sale of November 17 - 18, 2018. I give permission to KVW to share information on this page with fellow woodcarvers, publish the results & related pictures on their website and to the media.

Signature_____ Date_____

Please make your check payable to **Kaw Valley Woodcarvers Association**

PO BOX 8603

Topeka, KS 66608

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