Exhibitor Participation Agreement

Date: [Insert Date]
Exhibitor Name: [Insert Exhibitor Name]
Contact Person: [Insert Contact Person]
Address: [Insert Address]
City, State, Zip: [Insert City, State, Zip]
Email: [Insert Email]
Phone: [Insert Phone]
Event Details
Event Name: [Insert Event Name]
Date of Event: [Insert Date of Event]
Location: [Insert Event Location]
Agreement Terms
 The exhibitor agrees to participate in the festival showcase on the specified date. The exhibitor agrees to the booth size and location as outlined in the festival guidelines. The exhibitor will provide necessary materials and setup before the event starts. Payment details and cancellation policies are outlined in the attached document.
Signature
By signing below, you agree to the terms and stipulations set forth in this agreement.
Authorized Signature:
Name: [Insert Name]
Date:

Thank you for your participation in [Insert Event Name]. We look forward to a successful showcase.