

CARe SHOW

8th Annual

2011 CARe SHOW Non-Show Car Exhibitor / Vendor / Sponsor Application

Sat., Feb. 5, 2011

The Day Before Super Bowl Sunday

San Juan Capistrano Community Center Sports Park
25925 Camino Del Avion
San Juan Capistrano, CA 92675

Please print neatly with ball point pen.

Business name: _____

Contact name: _____ Phone No: (____) _____

Address: _____ Fax no: (____) _____

City: _____ State: _____ Zip Code: _____

Please give appropriate details on your participation as Non-Show Car Exhibitor, Vendor or Sponsor.

Description of all merchandise to be sold: You must be specific about ALL merchandise, food and beverage to be sold.
Merchandise not listed may not be sold! If you have a photo of your booth or merchandise, please send it with this application.
Sponsor donation: Please detail the dollar amount and form of recognition that has been discussed and agreed upon.

(Attach additional pages if needed)

Requested space:

We will assign best available space. We provide space only. Plan on providing your own tables, chairs, awnings, etc.

Space required: ____x____ **Need electricity?** Yes No Parking vehicle in your space? Yes No

Trailers: Please list total dimensions of trailer: ___ ft long x ___ ft. wide. Does width include an awning? Yes No

If trailer hitch does not detach, you must include trailer hitch as part of your space requirements.

Located in grass area:	10 x 10	10 x 20	10 x 30	10 x 40	10 X 50
Space rental rates:	\$100	\$125	\$150	\$175	\$200

It may be possible to accommodate additional space. Call 949/240-1735 for quote. **TOTAL DUE** (Include with application) \$ _____
Please enclose a copy of California Resale License if selling taxable goods.

CUT-OFF DATE FOR APPLICATION, PAYMENT AND CANCELLATION IS JANUARY 28, 2011

Please complete the application and return with remittance in the form of cashier's check, money order or credit card to:
Capistrano Animal Rescue Effort Vendor Registration, P.O. Box 1089, San Juan Capistrano, CA 92693-1098

Information phone: (949) 240-1735 or FAX: (949) 240-1771 Tax ID #33-0923931 — non-profit 501 (c)(3)
E-mail: CAReSHOW@capoanimalrescue.com Website: www.capoanimalsrescue.com

Method of payment: Cashier's check payable to: CARE VISA Mastercard

Credit Card # _____ Signature: _____

Expiration Date: _____

Signature: _____ Date: _____

(By their execution herein, the vendor agrees to be bound by all of the rules and regulations attached.)

Thanks to our sponsors



San Juan Capistrano
Rotary Club

