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VENDOR APPLICATION

Name: _____ Title: _____

Company/Organization: _____

Phone: _____ Email: _____

Address: _____

City: _____ Zip Code: _____

Website: _____

Please describe what you will be selling/displaying in your booth: _____

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Total: _____

Insurance Requirement Notice: Each vendor must provide proof of general liability insurance (no less than \$1,000,000). Liability Insurance must have AzHC & Expo and Horseshoe Park & Equestrian Centre listed as additionally insured.

By signing this contract, the vendor, or its representative, is committed to be at the AzHC & Expo during the entire event. The vendor is to be set up and present prior to gates opening and remain open during event hours. The vendor is responsible for securing goods after hours. The vendor hereby agrees to indemnify and hold harmless the AzHC & Expo and Horseshoe Park against any damages or claims that may arise in connection with vendor's presence at the event and vendor's activities of any kind.

Signature: _____ Date: _____

Please make checks payable to: AZHC & Expo
 PO Box 444
 Dewey, AZ 86327
 For further information, please email us at azhcexpo@gmail.com
Thank you for joining us!