



Central Florida Franchise Owners Association of 7-Eleven Franchisees

VENDOR APPLICATION FORM

1. Company Name: _____
The undersigned (hereafter called the “exhibitor”) hereby applies for space in “Central Florida FOA Tradeshow” at Doubletree by Hilton Orlando @ Sea World on Wednesday, May 29, 2024.
2. Amount Enclosed \$ _____ Number of Booths _____ (Brokers: 2 Major Lines per booth). The booth fee is \$2199. Your check should accompany this contract and be received no later than May 29, 2024. The exhibit fee includes: table with pipe and drape, two chairs and booth ID sign. Booth fees are nonrefundable after May 5, 2024. Refund requests must reach our office in writing by May 5, 2024.
3. Programs or services to be exhibited: The following description is intended to aid us in avoiding service conflicts arising from space assignments. Please be explicit.
4. Please send all correspondence to the following address:
Mitra Yousefi, Central Florida FOA, 6402 Cava Alta Drive, Unit 409, Orlando, FL 32835.
This contract shall not be binding unless and until it is accepted and approved in writing by show management with the signature of our duly authorized representative.
5. The exhibitor agrees to and understands that the Central Florida FOA assume no liability for any loss or damage or liability for any injury to any person resulting from any act or omissions occurring during or in transit to or from the show. Each exhibitor assumes complete responsibility and liability for all loss, damage, or destruction of the show site by the exhibitor or any person brought on to the property on his/her behalf. The exhibitor also assumes all responsibility and liability for injury to any person or property in any way connected with the exhibitor’s display caused by the exhibitor, his agent, representative or employee.
6. IN WITNESS WHERE OF, APPLICATION HAS CAUSED THE CONTRACT TO BE SIGNED BY AN OFFICER OR PERSON DULY AUTHORIZED. BOOTH WILL BE PART OF SPONSOR PACKAGE (FOR OFFICE USE ONLY)

Today’s Date: ___ / ___ / _____

Name: _____ Title: _____

Signature: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Tel: _____ Fax: _____ Booth #: _____

Accepted By: _____ Show Management