# Wisconsin Construction Municipal and Landscape Expo Wisconsin Exposition Center @ State Fair Park West Allis, WI February 10 & 11, 2021

# **CONTRACT FOR EXHIBIT SPACE**

Company Na							
(As you want listed i	n program, on booth s	signs and name badges	s)				
Primary Contact	<b>:</b>		_Title:				
-	rmation to be sent to t						
Address		Ci	ty		State	Zip	
		: Fax		Ema	ail		
company websi	te:			_			
Company Contac	ct for billing			(if differ	ent from pr	imary contact)	
Company Produc	ct Description: (ple	ase print)					
PRICING:							
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300 SI \$2000	000 SI \$34	00 1400 SI	\$7900				
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OR CHARGI	E TO: Visa N	MC CARD#_			]	EXPCC	)DE
Printed Nam	e		Title:			AMT : \$	
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Authorized S	Signature:						
Send sig	ned contract a	nd payment to	o: J	EWEL E	XPOSIT	IONS, LLC	
ALA				PO Box 7		,	
			_				4 1202
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Wisconsin Construction Municipal & Landscape Expo

## **WCMLE Terms and Conditions**

## **Booth Fees**

Total booth fee is due if an exhibitor cancels booth. The booth fee must be paid in its entirety prior to move-in. Failure of an exhibitor to pay the booth fee at the indicated time will result in the entire booth fee coming due.

Cancellation of the exposition is cause for the exhibitor to receive a refund of all amounts paid. Exceptions are natural disasters (hurricanes, snow storms, tornadoes etc.) labor strife and labor strikes causing cancellation or show delays.

Exhibitors are not allowed to cancel their contract because booth assignment requests have not been realized. Management will make reasonable effort but is not liable to comply with an exhibitor's particular booth request.

Subletting is not allowed. If, in the opinion of management, the goals or exhibition themes are not being realized by the exhibitor, management is under no obligation to rent space to the exhibitor in question.

#### **Codes and Taxes**

Compliance with all local, city and state fire and safety codes are the responsibility of the exhibitor.

If an exhibitor does not conform to the guidelines set forth by management the exhibit will be prohibited.

Payment of taxes and license fees to local, city and state agencies when required by law is the exhibitor. A sales tax authorization is required if exhibitor is selling products or services in their booth.

#### Insurance

A certificate of insurance is required. A policy for comprehensive liability insurance and contractual liability insurance in the amount of not less than \$1,000,000 for personal injury and property damage must be in the possession of the exhibitor prior to set up.

Theft and fire insurance policies are recommended.

Exhibitors are required to be covered by liability insurance (naming Jewel Expositions LLC as the co-insured) of not less than \$300,000 for any injury to each person and not less than \$1,000,000 for each accident and not less than \$100,000 property damage for each accident to protect against possible claims.

The exhibitor shall assume full responsibility for property damage, personal injury or death to any individual or party due to the exhibitor's participation in the exhibition.

#### Indemnification

Each exhibitor agrees to indemnify and release from responsibility Jewel Expositions LLC, its subcontractors and facility management from all liability, claims, property damage and losses which might occur from an exhibitor's participation in the exhibition and subsequent activities.

#### General

Wisconsin Construction, Municipal and Landscape Expo (**WCMLE**) will be held at the Wisconsin State Fair Park Exposition Center, West Allis, Wisconsin on February 10 and 11, 2021.

Exhibits must be staffed by qualified individuals and must remain intact until official closing of the show. No exhibit can extend beyond the designated booth space. Any portion of an exhibit that obstructs the view or otherwise interferes with privileges of other exhibitors shall be removed or modified.

Jewel Expositions LLC shall have the sole authority to interpret and enforce all rules and regulations as shall be necessary for the orderly conduct and in the best interest of the trade show.

Accepted By:	Date: