



OCT 5 & 6, 2019  
**EXHIBITOR  
INFORMATION  
FORM**

**IMPORTANT DEADLINE: AUG. 1**

- Invoice
- Exhibitor Information Form
- Other Forms\*

Mail to: Attn: Brooke Wilson (Women's Show), 275 Radio Road, Hanover, PA 17331

Please print clearly or type information and return this form

COMPANY NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SHOW WEEKEND PHONE NUMBER:** \_\_\_\_\_

(WILL BE USED IN THE EVENT WE MUST CONTACT YOU WITH ANY QUESTIONS)

**Booth Activity:** Will you be offering a health screening at your booth? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide details: \_\_\_\_\_

**PA Sales Tax:** A PA Sales Tax number is required if you plan to sell anything at your booth.

Will you be selling any items at your booth? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide your **PA SALES TAX ID#** \_\_\_\_\_

**Fundraising:** In conjunction with our efforts on behalf of Breast Cancer Awareness Month, The 2019 Women's Show is encouraging it's vendors to join the cause. You may choose to donate a percentage of your sales, a flat monetary amount, etc. to Pink Power of York. A great way to get Your Business connected to the community with a worthy, LOCAL, cause.

\_\_\_\_\_ Yes! I would like to be contacted about donation efforts to get involved!

**Exhibitor Agreement:** I have read and understand all items contained in the exhibitor information/policy provided with the exhibitor materials. Additionally, I warrant that I take full responsibility for all those representing my business at the show and have explained all of the terms outlined in this exhibitor information packet. I understand that the Women's Show retains the right to make any changes and amendments deemed necessary. No guarantees are issued.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Questions? Contact **Brooke Wilson** at 717-637-3831, or email [bwilson@forevermediainc.com](mailto:bwilson@forevermediainc.com).