

## Exhibitor Guidelines & Payment Information

To expedite registration process, please complete application online at  
**volusiachamberalliance.com**

1. The Volusia Chamber Alliance reserves the right to accept or reject an exhibit application.
2. Vendor tables are 6' tables and a tablecloth is provided. Two chairs will be placed at each table.
3. The event begins at 4pm. All booths must be set up by 4pm.
4. Exhibitor locations will be assigned after May 24 registration deadline.
5. Electricity is not available.
6. All exhibits must be contained to the table top. Floor displays can be secured at the \$500 level.
7. Exhibitors must not pack up and/or vacate their booth space until the expo is over at 7pm – *no exceptions*
8. Exhibitors may not sublease or share their assigned space.
9. Exhibitors must conduct all activity within their assigned space. A representative for the exhibitor must be on duty at all times during Mega Mixer & Buy Local Expo hours. Nothing may be set upon or across aisles. This is to provide for emergency access by the Police and Fire Rescue Departments. If additional space is needed for any reason, you must pay for a second space.
10. Operating of heavy equipment, combustion engines or motors will not be allowed.
11. No amplified sound will be permitted in booths – music or voice – in consideration of exhibits nearby.
12. Each Exhibitor warrants that it has in effect and shall remain so for the period of occupancy under this agreement a policy of general public liability insurance against claims for personal injuries or death, or damage to property occurring upon, in or about the exhibit space.

I \_\_\_\_\_ agree to the above conditions.

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

**Due to the nature and costs in preparing this event, we will be unable to issue any refunds or credits for any reason. Make checks payable to **Volusia Chamber Alliance, 115 Canal Street, New Smyrna Beach, FL 32168****

### PAYMENT INFORMATION

Check \_\_\_ Cash \_\_\_ Credit \_\_\_ Total Amount Paid \$ \_\_\_\_\_

Visa / Mastercard Credit Card # \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing address: \_\_\_\_\_

Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**For more information, contact your local Chamber of Commerce:**

Daytona Beach Chamber of Commerce (386) 255-0981

Holly Hill Chamber of Commerce (386) 255-7311

Port Orange South Daytona Chamber of Commerce (386) 761-1601

West Volusia Regional Chamber (386) 490-4606

DeLand Area Chamber of Commerce (386) 734-4331

Ormond Beach Chamber of Commerce (386) 677-3454

Southeast Volusia Chamber of Commerce (386) 428-2449

