

FilKONtario 21

Delta Hotel Toronto Airport West

April 1 - 3, 2011

www.filkontario.ca
Dealers@filkontario.ca

Vendor's Package

Pricing: *Dealer tables(6'):*
 \$ 45.00,
 add \$ 5.00 for consuite privileges (for one person)
OR add \$ 25.00 more for one full membership (on a per table basis)
 \$30.00 for Saturday only (plus \$5 for consuite privileges; or plus \$15 for
 for full Saturday membership - as above)

Filk Bizarre Consignment:
 half-table maximum at 10% of sales to FKO
 up to maximum of \$45.00

Payment (in Cdn funds - must be received in advance of FKO)

Cheques should be made payable to FilKONtario, and sent to:

FilKONtario
#98 - 145 Rice Ave
Hamilton, ON L9C 6R3
Canada

Special Requests

If you require access to an electrical outlet, please specify this. As the convention does not have specific supplies on hand, please bring your own power bar and **grounded** extension cords. Also, if you wish a particular position in one of the dealers' rooms, please let us know. We will do our best to accommodate your request on a first come, first served, basis.

Vendors' Wares

We reserve the right to have vendors remove any products displayed which the Convention Committee may judge to be inappropriate or illegal. This also applies to any products judged to be hazardous. Failure to remove these products may result in the vendor being asked to leave the convention without refund.

Move In/Move Out

Dealers may begin to move in on Friday, April 1, at 3 pm. Move out commences after 3 pm on Sunday, April 3, to be completed by 6 pm. **You must check in at registration prior to setup.**

Dealers Rooms Hours

Friday 6 pm - 9 pm, Saturday 10 am to 5:30 pm (depending on time of banquet); Sunday 10 am to 3 pm (and other times at Dealer's coordinator's discretion).

Security

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While the Dealers Rooms will be locked outside hours of operation, neither FilKONtario, nor the Delta Hotel Toronto Airport West, can be held responsible for any theft, damage, etc, which may occur.

Request for Dealers' Table(s)

Dealer Name:

Contact Person:

Phone: _____ Fax:

email:

Address:

City: _____ Province/State: _____ Postal/Zip Code:

Special Requests:

Brief Description of Wares:

of Tables @ \$45 each: _____ # Consuite @ \$5: _____ # Membership @ \$25: _____

Total \$: _____

I have read the above and agree with the terms and conditions noted herein:

Date: _____ Signature:

Name: (Printed):

Comments/Questions: