

Ozarks Model Railroad Association

Individual Vendor Registration Form and Agreement

2019 Spring Train Show
Saturday, March 23, 2019

SPRINGFIELD EXPO CENTER
 635 E St Louis Street, Springfield, MO 65806

OMRA reserves space and tables on a first come, first served, basis. Please register early.

Please complete all information requested to help us serve you better. Thanks!

Your Name: _____ **Assistant's Name:** _____ (1 Please)

Address: _____ **City:** _____ **ST** _____ **Zip** _____

Phone: (____) _____ - _____ **Email:** _____ @ _____
 (All show correspondence will be conducted by email once registration is received)

Emergency Contact: Name _____ **Phone:** (____) _____

I request _____ **6' tables**

First Table – Includes City of Springfield Vendor License	\$ 25.00
Additional Tables	@ \$20 each = \$ _____
(Check enclosed # _____)	Total = \$ _____

Electrical Connection Needed? - Yes ___ No ___

Mail This Form & Check to:
Make your check
payable to OMRA

Ozarks Model Railroad Association
c/o Dave Hockensmith
1637 S. Charing Rd, Springfield, MO 65809

SELECT THE TABLE ARRANGEMENT YOU PREFER BY PLACING AND X IN THE SPACES BELOW

Special Needs/Requests: _____

For more information: check OMRA web – <http://www.omraspringfield.org>
 email OMRASHowsdwh@gmail.com

Text or Call Dave at 417-766-6114. Please leave a voicemail if necessary. Your call will be returned as soon as practicable.

Please Read before Signing:

Cancellation Policy: You may cancel for a refund by written notice postmarked (email date stamped) February 22, 2019, or earlier, or you may choose to apply your paid table fee to the next scheduled show. Cancellations postmarked (email date stamped) after February 22, 2019, will not be refunded.

By my signature:

1. I affirm that I have read and understand the above stated cancellation policy.
2. I understand that It is my responsibility to secure my table(s), wares, and possessions, the day of the show and that OMRA is not responsible for lost or stolen items of merchandise or personal property.
3. I will NOT begin packing up my display and/or sale items until the show closes at 3:00 P.M.
4. This reservation is for my personal/business use. All vendors are required to reserve their own space, by name, with an individual reservation. No exceptions unless agreed upon in writing with the vendor coordinator prior to the day of the show.
5. I am responsible for compliance with Missouri tax codes.
6. I understand that while OMRA assigns vendor space on a first come, first served basis, and makes every effort to honor specific location, table arrangement, and special needs requests, it may not be possible to honor all of my requests due to other considerations.

Vendor Signature: _____ **Date:** _____

(OMRA USE ONLY: Postmark: _____ - ____ 2019 Posted: _____ - ____ 2019 Email Ack _____ - ____ 2019)