



TKA's 2016 Boutique & Trunk Show  
**Vendor Contract**

OFFICE USE ONLY	
DATE	/ /
AMOUNT	
CHECK #	
WAIVER	Y / N

*Thank you for your interest in participating in our Boutique & Trunk Show*

- ❖ Event Date/Time: Wednesday, October 12, 2016 from 8:30 am - 5:00 pm
- ❖ Location: M. Nelson Loveland Sports & Fine Arts Center on The King's Academy Campus
- ❖ Set Up Date/Time: Tuesday, **October 11<sup>th</sup> from 8 p.m. to 10 p.m.** and  
 Wednesday, October 12<sup>th</sup> from 7:00 am - 8:30 am
- ❖ Vendor Requirements:
  - \$100 per 8' x 5' space
  - 10% donation of sales
  - Donation of one item valued at \$50 or more – per contracted space
  - Submission of **Waiver, Release and Hold Harmless Agreement**
- ❖ TKA will provide 8' or 6' vendor tables (size based on availability and on a first come first served basis)  
 Vendor must provide floor length table linens for 8' table.
- ❖ TKA will provide event-specific receipt books **required** for vendor use.
- ❖ A limited number of vendors will be selected based on space availability and duplication of merchandise.
- ❖ The sale of counterfeit and non-authentic merchandise is prohibited.
- ❖ Vendors will be sent an email confirmation once contract is accepted.

**Business Name** \_\_\_\_\_ **Contact** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Web Address** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

Vendor Fee includes

- \$100 per 8' x 5' space x \_\_\_\_\_ # of tables (non-refundable)
- My company will donate \_\_\_\_\_% of sales (minimum 10%)
- I agree to donate one item valued at \$50 or more - per contracted space

Amount Enclosed \$ \_\_\_\_\_

By signing this contract, I am agreeing to the aforementioned requirements.

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

**Return completed form with payment ASAP as space is limited. Keep copy for your records.**

Registrations fees must be submitted with application; however, will only be processed upon acceptance of registration.

For more information, contact Rosario Larson at (561) 686-4244 ext. 319.

Please make checks payable to **The King's Academy** 8401 Belvedere Road, West Palm Beach, FL 33411

In order for the event to offer a variety of unique merchandise, we need more information about your merchandise. If you have not been with us in the last 2 years, or if you have changed your merchandise selection, please take a moment to give us more information about what you will be selling at the show.

_____	Percent of Inventory	Particular Style/ Type/ Specific Line Please indicate brand name as well as particular type in a category (i.e. designer bags vs hand crafted, beach bags vs evening bags, fine jewelry vs fashion jewelry, flip flops vs dress shoes etc)
<i>Business Name</i>		
Category of Merchandise		
Jewelry		
Women's Clothing		
Children's Clothing		
Handbags/ Totes		
Shoes		
Fashion Accessories (belts, scarves...)		
Hair Accessories		
Home Décor/Entertaining		

Table Preference 8' Table or 6' Table or I will not need a table (circle one)

Will you have any merchandise racks? Yes No (circle one)

Will you have any other large/tall display pieces? Yes No (circle one)

Do you need electricity? Yes No (circle one)

Other Special Needs and Set-up Requests \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(Fulfillment of Requests are Not Guaranteed)

Waiver, Release and Hold Harmless Agreement

In consideration of permission granted by The King's Academy, Inc. allowing me to participate in The King's Academy Boutique & Trunk Show which will occur October 12, 2016.

I represent, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows:

1. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or in part by the negligence or other fault of The King's Academy, Inc., and/or its or their departments, trustees, affiliates, employees, officers, agents or insurers ("Released Parties").
2. I waive all claims against any of the Released Parties for any injuries, damages, losses or claims, whether known and unknown, which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I release and forever discharge the Released Parties from all such claims.
3. I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

I have carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. I understand it fully and I execute it voluntarily.

Business Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

Responsible Party: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please Print)

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please Print)