



October 29 – November 1, 2009

Hosted at the Sheraton Chicago Northwest, 400 W. Euclid Ave., Arlington Heights, IL 847-394-2000

VENDOR CONTRACT

All vendors must provide the information in the table below to the vendor coordinator to reserve a slot as well as payment to reserve a vendor space. You may provide the information in one of two ways:

- **ELECTRONIC:** Send Paypal payment to weem-vendor@chicago.us.mensa.org. Please provide the information in the table below in your Paypal payment mail. You will be required to sign the contract on-site before setting up your space.
- **REGULAR MAIL:** Make out a check to "Chicago Area Mensa" and mail it along with a printed and completed version of this form to WeeM Vendors c/o JC Chupack, 1753 Hillside Ct, Gurnee, IL 60031.

Pricing is as follows: convention speakers – free, Mensa members - \$35, Non-members - \$55. Tables will be assigned by the Vendor Coordinator. If a slot is not available, your payment will be returned. If you have special requests for your table as far as location, amenities, or times, please note them below, and the Vendor Coordinator will contact you regarding accommodation. If you have any questions, contact the Vendor Coordinator (JC Chupack) at weem-vendor@chicago.us.mensa.org or 847-302-4165. The vendor area will be open Thursday from 5pm-8pm, Friday from 5pm-8pm, and Saturday, from 10am-8pm. Vendors may set up an hour before the area opens each day. Vendors may operate for part or all of the vendor hours. The vendor area will be in a public area within the hotel. Each space includes an eight-foot skirted banquet table unless otherwise confirmed with the Vendor Coordinator. The vendor area will not be secured. Vendors are responsible for transporting, setting up, securing, and taking down their merchandise. Chicago Area Mensa will not provide volunteers to staff the tables. All merchandise left on-site after 8pm on Saturday will be considered property of Chicago Area Mensa and will be auctioned off to benefit local scholarships unless other arrangements have been agreed to by the Vendor Coordinator or Regional Gathering Chairs.

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| Business Name (if applicable) | |
| Primary Contact Name | |
| Mensa Member Number (if applicable) | |
| Contact E-mail Address | |
| Contact Phone Number | |
| Product Description | |
| Do you need electricity? (Note: you must provide your own extension cords and/or surge protectors.) | |
| Other Special Requests or Notes (e.g., only need a table on Saturday, need extra chairs) | |

Contract Acceptance

The undersigned agrees to purchase vendor space and abide by the time and space details listed above for displaying products for sale at HalloweenM 34: the Regional Gathering of Chicago Area Mensa.

Authorized Signature & Title

Date

\$ _____
Amount Enclosed

DEADLINE IS 8 OCTOBER 2009.