

Exhibitor Contract

67th Annual T.W.U.A. Southeast Regional School

Location: Holiday Inn -Beaumont Plaza
3950 IH 10 South
Beaumont, TX

School Dates: April 28th – May 1st, 2025
Exhibit Date & Time: Tuesday, April 29th, 9AM - 3PM

Terms of Contract:

Displays are to be setup Monday, April 28th, 2025 **after 1PM**, and dismantled Tuesday, April 29th, 2025 **after 3 PM**. Exhibit items must fit in booth space(s) allotted, with no exhibit allowed outside the building. There shall be no flammable liquids. All reasonable attempts should be made to protect the Holiday Inn from damages. The exhibitor shall assume all liability or loss. The exhibitor shall make every effort to ensure the integrity of the school. In the Event of changes, all exhibitors will be notified in writing. Any cancellations received six weeks prior to the school will receive 50% refund. Less than six weeks' notice will result in the entire exhibit fee being forfeited. Cancellations must be received in writing by the TWUA at PO Box 7851, Beaumont, TX 77726. **Breakfast is provided for all booth representatives on this sheet on Tuesday, April 29 at 7:00AM at the Holiday Inn Houston Room (room subject to change).**

Firm Name _____ Telephone: (____) _____
(Please print)

Mailing Address _____

Exhibitor Representatives 1 _____ 2 _____

Additional Representatives +\$50 each 3 _____ 4 _____
Specify type of product
or service to be exhibited _____

What companies would you prefer to be away from? 1 _____, 2 _____, 3 _____

Please enter the desired quantities and amounts: Number of Booths _____ @ \$500 _____

Payment: <input type="radio"/> Check #: _____ <input type="radio"/> Credit Card* last 4 digits: _____	Additional Representative(s) _____ @ \$50 _____ Lunch Tickets _____ @ \$10 _____
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Total _____

We the undersigned, having applied for exhibit space at the T.W.U.A. Southeast Regional School agree to abide by the conditions of this contract. It is mutually agreed that there are no oral or written agreements other than those printed or written herein, and that neither the terms nor conditions of this contract can be modified.

Print Name _____ Signature _____

Make all checks payable to T.W.U.A. Southeast Region.

Mail to: **PO Box 7851, Beaumont, TX 77726** ****If mailing, please email a copy of this form to Nicholas.cook@missouricitytx.gov to reserve your booth in a timely manner.**

*Please provide the Credit Card Authorization filled out in its entirety to: twuasetreasurer@yahoo.com and [CC bennyl@lumbertonmud.com](mailto:bennyl@lumbertonmud.com)

(This line for T.W.U.A. use only) Treasurer Approval _____ Date _____ No _____