

EXHIBITOR FORM

IMPORTANT: To reserve a booth space, first-time Exhibitor must submit this Exhibitor Form, along with the Exhibit Space Contract.

(PLEASE TYPE OR PRINT)

(I LEAGE I'II E ON I MINT)				
COMPANY NAME			DATE	
		PHONE		
			FAX	
			ID #	
NAME and POSITION				
EMAIL ADDRESS				
,	***ENCLOSE COPY O	F STATE RESA	SALE LICENSE***	
Please check applicable c	ategory(s) below (chec	k all that apply	y):	
1. Our company is:				
☐ Show Dealer of Show Dealer w	vith store/showroom	f aviata)		
□ Equipment Mar	nufacturer			
Manufacturer F	Representative/multiple	resources (Ter	erritory)	
☐ Manutacturer R	≀epresentative/single re tor/Wholesaler	esources (Territ	itory)	
☐ Retailer	e)			
2. If Manufacturer, is comp Utah or Washington?			a, California, Idaho, Nevada, Oregon, whom?	
NAME_				
ADDRESS				
CITY		STATE_	ZIP	
3. If Manufacturer Representation number).	entative, list all compar	nies you repres	sent (include contact person and phone	

which will be displayed in exhibitance to display items which has brevious Gem Faire?	ave not been identified in
revious Gem Faire?	
aire? ☐ Yes ☐ No er your company name? ☐ Ye space contracted by another co	
to be located next to or across f	rom your exhibit space:
display at Gem Faire (check al	I that apply):
ewelry Accessories isplay/Fixtures/Retail Services	☐ International Goods☐ Jewelry☐ Metalwork☐ Minerals/Fossils
ashion Accessories ock Shop eneral Lapidary	☐ Other (describe)
1 1 2	to be located next to or across for the



COMPLETE FORM AND RETURN WITH EXHIBIT SPACE CONTRACT TO:

GEM FAIRE, INC.

PO Box 55337
Portland, OR 97238
Email: info@gemfaire.com
GEMFAIRE.COM

