

# Emerald Ball Vendor Form

May 2<sup>nd</sup> – 7<sup>th</sup>, 2017

If you would like to be a vendor at the 2017 Emerald Ball, a **non-refundable deposit of \$1,000 will be needed by January 31<sup>st</sup> to reserve your space.** If we do not receive a deposit by January 31<sup>st</sup>, your spot will be open to another vendor. We must receive full payment prior to March 31<sup>st</sup>, 2017 or you will be subject to an additional late fee of \$250.

If you have questions or require further information please email [wayne@dancevision.com](mailto:wayne@dancevision.com).

## VENDORS ARE REQUIRED TO:

- Pay a minimum vendor fee of \$1,650 or 10% of the gross revenues, whichever is greater.
- Additionally, vendors are required to pay a flat fee of \$150 toward the cost of a security guard for 5 nights (TU/WE/TH/FR/SA).

## OPTIONAL ADVERTISING:

You may also place an additional full-page black & white advertisement in the souvenir program at the cost of \$300. You may e-mail the ad to [wayne@dancevision.com](mailto:wayne@dancevision.com).

## HOTEL ACCOMMODATIONS:

You must book your hotel room directly by calling (310) 410-4000 or (800) 445-8667. The Emerald Ball has a block of rooms reserved at a special discount price of \$179 plus tax per night for single or double occupancy. You must mention the code "EME" to secure this special rate. All vendors must book at the Hilton Hotel and mention the "EME" code. You can also book online at [www.EmeraldBall.com](http://www.EmeraldBall.com)

Vendor Fee	\$1,650
Security Fee	\$ 150
Additional Competition Program 8.5" x 11" black & white ad (\$300)	\$ _____

**Total Amount Due** \$ \_\_\_\_\_

Payment	Method _____	Date _____	R _____	\$ _____
<b>(deposit due by January 31<sup>st</sup>)</b>				
			Amount Remaining	\$ _____

Payment	Method _____	Date _____	R _____	\$ _____
			Amount Remaining	\$ _____

**PRODUCT(s)** \_\_\_\_\_

Company Name \_\_\_\_\_

Credit Card # \_\_\_\_\_ CVC: \_\_\_\_\_ Expires \_\_\_\_\_

**(Visa/MasterCard only. All credit card transactions will be subject to a 4% service charge)**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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

Alternate Phone or Fax: ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

**Please make check payable to Emerald Ball and mail to  
Wayne Eng, 9081 W Sahara Ave Suite 190, Las Vegas, NV 89117  
You may also fax credit card information to 702-256-4227**