

OrigamiUSA Convention 2009

Vendor Registration Form

Name: _____

Name of Business (if applicable): _____

Address: _____

Telephone Numbers: (day) _____ (eve) _____

E-Mail address: _____

Please note that if you will be sharing a table with another vendor, there is no extra charge, but both vendors MUST be registered for the convention, and each must sign the copyright policy form.

Additional vendor(s): _____

Please provide a brief description of what you will be selling at Origami Convention '09:

Circle the days that you would like to register for:

Friday (6/26)

Saturday (6/27)

Sunday (6/28)

Cost: For Friday, I need _____ 6' tables x \$40 \$ _____

For Saturday, I need _____ 6' tables x \$40 \$ _____

For Sunday, I need _____ 6' tables x \$40 \$ _____

Total Cost \$ _____

Please make your check payable to OrigamiUSA and mail it, along with this form, to OrigamiUSA, 15 W 77 Street, New York, NY 10024-5192. Please mark your envelope "Vendor Registration."

I hereby agree to follow OrigamiUSA's copyright policy. In particular, I agree that I have received permission from the original creators of all origami models that I will sell at Convention '09. I also agree that my products for sale will be non-political and suitable for a family audience. I also agree that if a complaint is made regarding the above, and if that complaint is found to be valid, then I will cease selling immediately and leave the selling area, forfeiting my vendor registration fees.

Signature: _____ Date: _____

Additional Vendor Signature: _____ Date: _____