



**June 15th & 16th, 2019**  
**The Conscious Living Showcase is health, wellness, & nutrition specific.**

**Yes, I would like to make a reservation to exhibit.**

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

E-mail \_\_\_\_\_ Office \_\_\_\_\_ Cell \_\_\_\_\_

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

Website \_\_\_\_\_ Social Media (Facebook, Instagram, etc.) \_\_\_\_\_

Brief description of your business and/or products \_\_\_\_\_

**How did you hear about us? Please circle or write in your answer.**

KoneheadProductions.com    Lay It Out Events    Referral    Other \_\_\_\_\_

**Please circle or highlight size of space required below.**

(5X5 Space \$200.00) Canopy provided; please note that the 5x5 canopies do not have side curtains.

(10x10 Space \$450.00)      (10x10 End Cap \$550.00)

(10x15 Space \$650.00)      (10x20 Space \$1,000.00)      (10x20 End Cap \$1,250.00)

Other size combinations can be negotiated by contacting Jim Kone.

Please complete this form and return to Jim at jim@koneheadproductions.com immediately to ensure your participation. **No percentage of sales required.** After submitting completed form, you will be sent an invoice. YOU CAN PAY BY CHECK OR CREDIT CARD.

Office Use Only: Space assignment number \_\_\_\_\_

**INDEMNIFICATION**

**56634464.56633792.** Vendor shall indemnify and hold harmless Lay It Out Inc, 2019 Bite of Bend Festival, The City of Bend from any claims or liabilities resulting from Vendor's performance, including any and all loss, damages or expenses caused by negligent acts, statements, errors or omissions of Vendor and its agents.

**56634464.56633793.** Vendor will indemnify, defend, and hold Lay It Out Inc and its directors, officers, employees, and agents harmless from any and all claims or liability (including without limitation any taxes, penalties, interest, costs, or attorney fees) asserted by any third party that results from or arises out of Vendor or Vendor's Personnel performing the Services under this Agreement.

**56634464.56633794.** Contractor will maintain adequate and reasonable liability insurance covering Contractor's performance under this Agreement. At any time, upon Lay It Out Inc.'s request, Contractor will submit to Lay It Out Inc proof acceptable to Lay It Out Inc of such insurance. Contractor will further notify Lay It Out Inc immediately of any substantial modification or cancellation of such insurance. Contractor acknowledges that Lay It Out Inc will not provide insurance coverage for Contractor.

**56634464.56633795.** Contractor will maintain in force any workers' compensation and unemployment insurance required by law relating to Services performed under this Agreement and will at any time, upon request of Lay It Out Inc, provide to Lay It Out Inc proof acceptable to Lay It Out Inc of such insurance. Contractor will further notify Lay It Out Inc immediately of any substantial modification or cancellation of such insurance.

Vendor agrees to abide by the rules and regulations of the Bite of Bend Festival. Vendor understands that they may not be asked to participate in future Bite of Bend Festival events if they are in violation of Bite of Bend Festival policies and they will lose their deposit.

**AGREED TO BY:**

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Vendor Representative Signature

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Date