



2019 Wings Over North Georgia Non-Profit Exhibitor Application

Date: _____

Contact Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Provide your Organization's Mission Statement: _____

Describe the Organization's Goal for Exhibiting at the Airshow: _____

Pictures of Exhibit Set-up: Yes _____ (cut-off for entries is July 31, 2019)

501 (c)(3) Status: Yes _____ (certificate must be provided)

Show Dates – Saturday, 8/31 and Sunday, 9/1 ~ Set up Day is Friday, 8/30

Should your organization be included as an Exhibitor you are responsible for purchasing Exhibitor Worker and Parking Passes, Saturday, 8/31 and Sunday, 9/1.

Passes are \$15.00 each (must be purchased prior to show weekend)

NOTE: ALL EXHIBITORS ARE TO BE SELF-CONTAINED. THIS INCLUDES YOUR OWN 10' x 10' BOOTH, TENT, TABLES, CHAIRS, ELECTRICITY AND WI-FI. WINGS OVER NORTH GEORGIA AIRSHOW WILL NOT FURNISH THESE PROVISIONS.

Name: _____ Phone Number: _____

Authorized Signature

WINGS OVER NORTH GEORGIA, LLC (*Non-Profit Exhibitor Terms and Conditions*)

- **Cancellations.** In the event that the event is canceled, postponed or relocated due to fire, strikes, government regulations, casualties, Acts of God, or other causes beyond Wings Over North Georgia control; The Exhibitor waives any and all damages and claims for damages should the event be cancelled.
- **Exhibitor Representative.** Each Exhibitor will name at least one person to be the Exhibitor's representative in connection with the event. Such representative shall be authorized to enter into such service contracts as may be necessary, and for which the Exhibitor shall be responsible.
- **Assignment of Space.** Space assignments (if applicable) will be made based on the date of receipt of completed applications, Exhibitor level, and consideration to enhance the event. Every effort will be made to respect "preferred" space choice, but Wings Over North Georgia, LLC's decision shall be final. ***There is no right of exclusivity of products or services.***
- **Set Up, Load In & Parking Instructions:** The Russell Regional Airport facility is located at **304 Russell Field Road NE; Rome, Georgia 30165**. Exhibitors are required to set-up on Friday, 8/30 between 8:00 AM–4:00 PM. Vendors are to check-in at the Exhibitor/Vendor Check-In location to be directed to your booth location. Once you have unloaded your trailer, tent, equipment and merchandise; you **must** relocate your vehicle from the air show ramp area to the reserved vendor/exhibitor parking areas as you will be instructed for each day of the show. You will receive your ticket package at check-in. You may make arrangements to pick it up earlier if needed. You are responsible for distributing them to your workers and inform them of the parking areas and rules.
- **Exhibitor Activities.** Exhibitors are asked to inform Wings Over North Georgia, LLC of any outside activity they intend to arrange in conjunction with the event. Your booth must maintain the original products, services and booth presentation that was originally contracted. ***No food & beverages may be sold or given away by any exhibitor.*** That is exclusive to our food & beverage vendors.
Your organization must adhere to professional business behavior and attire. The Exhibitor and/or his agents will not attempt to solicit in the common areas and/or in such a manner as to infringe on the ability of other Exhibitors to conduct their operations.
Note: The Exhibitor agrees to keep the rented space occupied by a representative during all the posted hours of the show.
- **Security.** Each Exhibitor has the responsibility of safeguarding its own exhibit materials or goods from the time they are placed in the exhibit space (if applicable) until they are removed. Exhibitor desiring special security precautions should arrange for private guard service at their own expense. There will be security on the grounds at all times, but not guarding your specific set-up exclusively.
- **Liability.** The Exhibitor hereby assumes the entire responsibility and hereby agrees to protect, defend, indemnify and save Wings Over North Georgia, LLC affiliates, employees, officers, directors and agents harmless against all claims, losses or damages to persons or property, governmental charges or fines and attorney's fees arising out of or caused by its installation, removal, maintenance, occupancy or use of exhibition premises or a part thereof, excluding any such liability caused by the sole gross negligence of the Wings Over North Georgia, LLC and its employees and agents.
- **Insurance:** It is required that you carry minimum \$1,000,000 liability insurance to protect yourself, Russell Regional Airport & Wings Over North Georgia, LLC against loss, injury, or property damage while vending your wares at the air show. This certificate is due to the WONG office by 8/16/19. Please read and follow the Instructions below:

Wings Over North Georgia, LLC will be an additional insured.

Include the **physical address** for the policy: **304 Russell Field Rd., N.E., Rome, GA 30165.**

- **Compliance.** The Exhibitor assumes responsibility for compliance with all pertinent ordinances, regulations, and codes of local, state and federal governing bodies; together with the rules and regulations of the operators and/or owners of the property wherein the exhibit is held. Cloth decorations must be flameproof. Wiring must comply with facility, fire department and Electrical Underwriters' rules. The Exhibitor will abide by and comply with the rules and regulations of Wings Over North Georgia, LLC authorized contractors and local unions operating at the exhibition facility.
- **No Guarantee of Results:** While we are committing a significant effort toward the promotion of this airshow within means, WONG does not guarantee any results from vending, nor does it guarantee a number of attendees.

Date: _____

Initial: _____

WINGS OVER NORTH GEORGIA, LLC (Non-Profit Exhibitor Signature page)

- **ADA Requirements.** Exhibitors are reminded that the Americans with Disabilities Act (ADA) ensure equal access to all participants of Wings Over North Georgia Meetings. Booth spaces must be fully accessible to those with physical disability or sight impairment in compliance with all applicable laws and regulations, including without limitation, the Americans with Disabilities Act (U.S. Public Law 101-336).
- **Management.** Wings Over North Georgia, LLC reserves the right to interpret, amend, and enforce these terms and conditions as it deems appropriate to ensure the success of the event.
- **Enforcement and Severability.** These terms and conditions create a contract between the parties and shall be interpreted pursuant to Georgia law, enforceable in and subject to the jurisdiction of the courts of that state, and the prevailing party in any dispute over these terms shall be entitled to recovery of its costs and attorney fees from the other. In the event that any one or more of the provisions contained therein shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provisions of this agreement, but this agreement shall be construed as if such invalid, illegal or unenforceable provisions had never been contained herein, unless the deletion of such provision or provisions would result in such a material change so as to cause completion of the transactions contemplated herein to be unreasonable.

NOTE: ALL EXHIBITORS ARE TO BE SELF-CONTAINED. THIS INCLUDES YOUR OWN BOOTH, TENT, TABLES, CHAIRS, ELECTRICITY AND WI-FI. WINGS OVER NORTH GEORGIA AIRSHOW WILL NOT FURNISH THESE PROVISIONS.

IN WITNESS WHEREOF, the parties have hereunto set their hands and seals.

WINGS OVER NORTH GEORGIA, LLC "PROMOTER"

By: WINGS OVER NORTH GEORGIA, LLC

Agent/Contact: Tina Talton

Signature: _____

Telephone: 706-291-0030 E-Mail address: tina@wingsovernorthgeorgia.com

Date: _____

"EXHIBITOR AGENT"

By: COMPANY: _____

Agent/Contact: _____ Signature: _____

Name: _____ On-Site Contact & Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-Mail address: _____

Date: _____