

2014 KCCTFCA Coaches Clinic Vendor Registration Form

Name _____ Company/Organization _____
Mailing Address _____ City/State/Zip _____
Phone (_____) _____ E-mail _____
Website _____

Products: Check all that apply

_____ **Track & Field Software** _____ **Uniform**
_____ **Track & Field Equipment** _____ **Awards**
_____ **Track Surfacing Products/Track Repairs**
_____ **Other (specify)** _____

Each vendor is asked to ***Donate \$50 in door prizes*** for the drawing that will take place during the awards luncheon. ***Items will be collected on Saturday the day of the clinic by 11:00 am.***

Describe your Products and Display unit:

(Use back if necessary; if you are new to our clinic; please enclose photos)

****We reserve the right to reject any application.***

WAIVER OF LIABILITY: The vendor hereby agrees to forever discharge and release KCCTFCA, it's successors and assigns from any and all debts, claims, demands, damages, actions and causes of action whatsoever, which may result from the use granted here under. All booths must be open for business at 6:00 pm on Friday and must remain open until closing time. All display units, merchandise and vendor property must be removed from the premises by 4:00 pm on Jan. 11, 2014 Vendor shall not in any way damage or permit damage of the premises or any portion hereof and if such damage shall occur, user shall be fully liable to repair the damaged property.

_____ **Booth Space @ \$100.00 (tables are available for your table/display units)**

Total enclosed _____ **NO REFUNDS after December 1, 2014**

Vendor Signature

Make check payable to:
KCCTFCA

Return this form with payment to:
KCCTFCA
c/o J.J. Wannamaker
10012 Ballentine
Overland Park, KS 66214

For KCCTFCA Staff Only

Date _____

Booth # _____

Amount \$ _____ CK# _____