

**LAKE OF THE OZARKS WOODCARVERS CLUB
WOODCARVING SHOW, SALE & COMPETITION
ENTRY FORM**

Vendor Entry Form due by: August 28, 2023
 Competitor/Exhibitor Entry Form Due: September 25, 2023
 Special requests for booth location will be honored when possible.

Exhibitor "A" Name: _____ Phone Number: _____

Exhibitor "B" Name: _____ Phone Number: _____

Exhibitor "A" Address: _____ City _____

State _____ Zip Code _____ Email Address _____

Helper's Name (Not Competing): _____

If you wish to be adjacent to another exhibitor, please list their name _____

Do you need electricity _____ Yes _____ No (Subject to availability)

Entry Fee: One booth space @ \$10.00 each x number of booth space(s) _____ x \$10.00 = \$ _____

**Note: You must cover/drape the front and both sides of your tables to the floor.
 Tables and Chairs must have leg caps to protect the gym flooring.**

I will donate a door prize(s) for the Show: _____ I will demonstrate during the Show: _____

Area Motel Information (mention you are attending the woodcarving show):

Dave's Hideaway 814 W. US Highway 54 Camdenton, MO 65020 573-873-7111 or www.daveshideaway.com	Sleep Inn 1390 E US Highway 54 Camdenton, MO 65020 573-317-4121
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ALL REGISTRANTS MUST READ AND ACCEPT THE FOLLOWING: By submitting your registration, applicant releases and agrees to hold harmless and to indemnify The Lake of the Ozarks Woodcarvers Club, Show officials and volunteers, event sponsors and their partners and their insurance carriers, and the Community Christian Church of Camdenton, from any and all claims, actions, damages, without any limitation whatsoever, for any loss damage or injury to any person or property which is caused directly or indirectly for any reason. By signing below, the undersigned has read, agrees to abide by, and has retained a copy of this registration. The undersigned also grants The Lake of the Ozarks Woodcarvers Club consent to take and use all Show photographs for advertising, news releases, or promotional uses without any compensation to the vendor/exhibitor.

_____ Date _____

Registrant Signature

Mail to: LAKE OF THE OZARKS WOODCARVERS CLUB
 P.O. BOX 1372
 CAMDENTON, MO 65020

FOR OFFICIAL USE ONLY:

Check #:	Date Entry Received:	Mailed Motel Info:	Further Communication Needed:
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