Vendor Entry Form due by: August 31, 2025 Competitor/Exhibitor Entry Form Due: September 30, 2025 Special requests for booth location will be honored when possible.

| Exhibitor "A" Name: | Phone Number: |
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| Exhibitor "B" Name: | Phone Number: |
| Exhibitor "A" Address: | City |
| StateZip Code | Email Address |
| Helper's Name (Not Comp | eting): |
| If you wish to be adjacent to | o another exhibitor, please list their name |
| Do you need electricity | Yes No (Subject to availability) |
| Entry Fee: One booth space | e @ \$10.00 each x number of booth space(s) x \$10.00 = \$ |
| Note: You must cover/drap | e the front and both sides of your tables to the floor. |
| I will donate a door prize(s) | for the Show: I will demonstrate during the Show: |
| Dave's Hideaway 814 W. US Highway 54 Camdenton, MO 65020 573-873-7111 or www.dav ALL REGISTRANTS MUST I applicant releases and agre Club, Show officials and vo the Community Christian C limitation whatsoever, for a indirectly for any reason. In a copy of this registration. T consent to take and use all | READ AND ACCEPT THE FOLLOWING: By submitting your registration, ees to hold harmless and to indemnify The Lake of the Ozarks Woodcarvers lunteers, event sponsors and their partners and their insurance carriers, and thurch of Camdenton, from any and all claims, actions, damages, without any ny loss damage or injury to any person or property which is caused directly or signing below, the undersigned has read, agrees to abide by, and has retained the undersigned also grants The Lake of the Ozarks Woodcarvers Club Show photographs for advertising, news releases, or promotional uses |
| without any compensation | 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 Re | eceived: Mailed Motel Info: Further Communication Needed: |