



# Vendor Application

Please mail Application/Vendor Contract to:  
 Judy Baker; Mogollon Health Alliance; 308 E. Aero Drive; Payson, Arizona 85541  
 (For more Information contact John Coppock [thundermountainride@gmail.com](mailto:thundermountainride@gmail.com))

## Contact Information:

(please type/ print )

Date: \_\_\_\_\_

\_\_\_\_\_  
 Name of Company

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 Type of Company, i.e.: Corporation, LLC or other, please specify

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Years in Business

\_\_\_\_\_  
 Name of Company Representative

\_\_\_\_\_  
 Cell Phone

\_\_\_\_\_  
 Company Mailing Address

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Zip

\_\_\_\_\_  
 Web Address

\_\_\_\_\_  
 Email Address

\_\_\_\_\_  
 FAX

\_\_\_\_\_  
 Type of Goods, Services or Products

\_\_\_\_\_  
 Type & Size of Display, Tent, Trailer, etc.

\_\_\_\_\_  
 Electrical requirements, please be specific - 20 amps, 30 amps etc.

(no generators in show area)

\_\_\_\_\_  
 Please list equipment requiring power

\_\_\_\_\_  
 Please list any rental equipment required from event provider

(equipment will require pre-payment)



**Vendor Fees:**  
(Outside Display Sites Only)

**Standard display sites: 10' x 10'; 10' x 20' and 20' x 20'**

One (1) 20 amp circuit included in basic rate (Spider boxes and additional amps available)  
For larger displays, to include trailers, please contact John at [thundermountainride@gmail.com](mailto:thundermountainride@gmail.com).

**Show Dates October 8<sup>th</sup> 9<sup>th</sup> & 10<sup>th</sup> , 2010**

**Display Rates**

10' X 10'	\$300.00
10' X 20'	\$500.00
20' X 20'	\$700.00

**Our Commitment to you:**

Thunder Mountain Ride, a motorcycle rally, hosted by the Mogollon Health Alliance is providing significant value for their guests. Paid participants will win 13 motorcycles, Polaris 500 ATV and \$5,000.00 in cash prizes. In addition, Mogollon Health Alliance will provide entertainment all three days along with great food & beverage, contests, local and national vendors and a "Kids Fun Park".

Mogollon Health Alliance, in partnership with the Town of Payson, has funded an aggressive advertising and marketing campaign that will form media and sponsor relationships designed to cross brand the event utilizing Print Media, Radio, Newspapers and Thunder Mountain Ride website [www.thunder-mountain-ride.com](http://www.thunder-mountain-ride.com)

**Judy Baker CEO**  
**Mogollon Health Alliance**



### Vendor Contract

In consideration of the sum of \_\_\_\_\_ dollars and by signing the following agreement, Mogollon Health Alliance, hereafter referred to as "Promoter", hereby grants to \_\_\_\_\_, hereafter referred to as "Vendor", the right to exhibit their company product(s) in the assigned space \_\_\_\_\_ at Thunder Mountain Ride during the dates of October 8, 9, 10, 2010. All payments are to be made payable to "Mogollon Health Alliance" with fifty percent due upon contract signing and the full amount to be paid by September 25, 2010. Down payments are non-refundable.

This contract is subject to the following, additional, conditions and agreements:

The vendor agrees to abide by all rules adopted by the promoter and sponsors and agrees that promoter shall have the final decision in enforcing any rule deemed necessary prior to, during and after the event. The vendor accepts all risks associated with the use of the vendor space and agrees to indemnify and hold harmless promoter, sponsors and Mogollon Health Alliance from any loss, injury or damages to property or persons incurred prior to, during and after the event. Vendor is responsible for incidental and consequential damages, including reasonable attorney's fees.

Vendor set up will begin Wednesday, October 6, 2010 at 11 am with vendor in place no later than 5 pm, Thursday, October 7<sup>th</sup>. The vendor agrees to occupy the space and agrees the display will not be dismantled or removed until the event is officially over at 3 pm, Sunday, October 10, 2010. Vendor shall not, without prior written consent of promoter, assign or sublet any part of the space.

The vendor agrees that if directed by authority of law, fire, safety inspectors or other causes beyond the control of the promoter, the assigned space may be altered or moved to remedy any violation or safety concern. Therefore, if directed, the vendor will be given equal or greater space in a location determined solely by the promoter.

The vendor shall procure, at its own expense, any necessary license(s) or permit(s) required for the purpose of displaying or selling product(s). Liability Insurance must be obtained by the vendor at their own expense and expressly name Mogollon Health Alliance, 308 E. Aero Drive; Payson, Az. 85541 as an additionally insured. Minimum amount of additionally insured insurance shall be one million dollars (\$1,000,000.00) and a copy of same shall be delivered to Mogollon Health Alliance no later than the September 25, 2010 contact payment deadline.

At the conclusion of the event, the vendor will be responsible for removing all product, fixtures and debris from the assigned space.

If for some reason the event is cancelled, the promoter on refunding all money received from the exhibitor, shall be released from all claims and damages.

Products to be displayed: \_\_\_\_\_

**Exhibitor:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Mogollon Health Alliance**  
**Total:** \_\_\_\_\_  
**Deposit:** \_\_\_\_\_  
**By:** \_\_\_\_\_  
**Date:** \_\_\_\_\_