



Vehicle Extravaganza
2562 Centennial Road, Salina KS
9:00 am - 3:00 pm
March 6th 2010

Vendor/Company Name: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Cell Phone: _____

E-mail: _____

Yes / No (circle one) if you would like your web site linked on our site.

Company Representatives who will attend the show:

1. _____

2. _____

3. _____

Cost: \$ 100 per vendor site size 12' x 12'

Other space requirements: _____

Describe what products of services you will be providing:

No Items promoting – Sexual Explicit materials, tobacco, drug or alcohol related

Set up the day of the show between 6:00a.m. - 9:00 a.m.

In consideration of and to permit my participation by showing one or more vehicles in the Salina Tech Vehicle Extravaganza to be held on the campus of Salina Area Technical College on Saturday, March 6, 2010, I hereby acknowledge and accept the risk of possible personal injury resulting from or caused by my participation in the Vehicle Show, and I hereby acknowledge and affirm my continued willingness and desire to participate. Further, and of my own free consent and volition, and in consideration of my participation in the Vehicle Show, I hereby agree to indemnify and hold harmless Salina Area Technical College, its administrators and employees, and to waive claims for any and all injuries, causes of action, or damages that I or my vehicles may sustain while participating in the Show. By signing below, I acknowledge that I have read and understood this waiver and release of liability and that I am signing it voluntarily.

Registrants Signature: _____ Date: _____

Contact: Salina Area Technical College – 785-309-3100 – email: blane.schloo@salinatech.edu