



California State Mining & Mineral Museum
 &
 Mariposa Gem & Mineral Club
 PO Box 753, Mariposa, CA 95338
 (209) 742-7625



**Mariposa Mineral & Gem Show
 April 8 & 9, 2017
Vendor Registration & Booth Space Application**

Business Information:

Contact name _____

Business name _____

Mailing address _____

City/State/Zip _____

Phone number _____

Fax number _____

Email address _____

Description of Products to be sold: _____

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Select Booth Size:

- \_\_\_ 10' x 10' Indoor (1 table, 2 chairs) - \$150
- \_\_\_ 10' x 20' Indoor (2 tables, 4 chairs) - \$275
- \_\_\_ 10' x 30' Indoor (3 tables, 4 chairs) - \$375
- \_\_\_ 10' x 10' Outdoor (1 table, 2 chairs) - \$100
- \_\_\_ 10' x 20' Outdoor (2 tables, 4 chairs) - \$150
- \_\_\_ additional 10' x 10' adjacent spaces - OUTDOOR ONLY - \$50 ea

Additional Items:

- \_\_\_ \$10 each additional 8' table (limited availability – reserve early if needed)
- \_\_\_ \$ 1 each additional chair
- \_\_\_ \$20 up to ONE additional electrical outlet (indoor booths only)

**Vendor Checklist:**

- All business information items completed on first page
- Requests for additional tables, chairs, and outlets
- Signature & resale number at the bottom of this page
- Check or money order made out to **CSMMMA** for the total amount below; mail to the address at the top of the front page  
(CSMMMA is the non-profit association for the CA State Mining & Mineral Museum)

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\$ _____ Booth space fee

\$ _____ Additional tables, chairs, outlet fee

\$ _____ **TOTAL**

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To pay by credit card (Visa, Mastercard or Discover), complete this section and mail the form to the address at the top of the front page. If you do not wish to mail your credit card information, please call Meredith Meehan at 559-868-3535 with your information. **PLEASE DO NOT EMAIL YOUR CREDIT CARD INFORMATION!!!**

**Card Number** \_\_\_\_\_

**Expiration Date** \_\_\_\_\_

**3 digit code on back of card (CRV)** \_\_\_\_\_

**By signing below you are authorizing the California State Mining & Mineral Museum Association (CSMMMA) to charge your card for the "total" amount specified above.**

**Signature** \_\_\_\_\_

**NOTE: Your space will not be reserved until we receive full payment.  
Cancellations after March 1, 2017 are non-refundable!**

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I understand that providing false information may invalidate my registration. I hereby affirm that the information provided is correct.

Resale Permit # _____

Signature _____ Date _____