



The Well Experience Conference 2019  
**EXHIBITOR APPLICATION FORM**

Name		Title
Business Name		
Mailing Address		
City	State	Zip Code
Phone Number	Email Address	
Website		

Please provide a brief description of the products/goods/services you will be selling/promoting, including a price range.

Qty: \_\_\_\_\_ **BUSINESS BOOTH(S) x \$250 (Exhibitor Booth) = Total: \$** \_\_\_\_\_

- Exhibitor booth includes one 1-6 ft. product table, two chairs, table tent/sign, listing on conference website. Electricity is not guaranteed with exhibitor booth.
- Exhibitor booths are not product exclusive for the conference.
- Exhibitors must have authentic, quality, reputable products/goods/services to showcase during the conference.
- Exhibitors must have appropriate licenses and permits necessary for booth items.
- Exhibitors are responsible for the production of print materials/handouts for individual booth.

Qty: \_\_\_\_\_ **FOOD BOOTH(S) x \$150 (Exhibitor Booth) = Total: \$** \_\_\_\_\_

- Food Exhibitors must have the necessary permits/licenses required to distribute/sell food items.
- Food exhibitors must have the necessary generators/equipment to distribute/sell food items.

**GRAND TOTAL: \$** \_\_\_\_\_

**THERE ARE NO REFUNDS ISSUED FOR EXHIBITOR BOOTHS**

**CREDIT CARD AUTHORIZATION**

Name on Credit Card		Credit Card Type
		◇ Visa ◇ Mastercard ◇ AMEX ◇ Discover
Card Number		
Exp Date	CVV Code	Zip Code
I hereby authorize The Lighthouse Church to charge my credit card in the amount of \$_____.		
Signature		

## EXHIBITOR APPLICATION FORM - CONTINUED

I shall and will hold harmless The Lighthouse Church and all related entities from and against any and all claims, liabilities, demands, expenses, fees, penalties, suits, proceedings, actions and causes of action of any and every kind and nature arising from or out of, or in any connected way with exhibitor use, occupancy or activities in or related to The Well Experience Conference on June 14-16, 2019 (Houston, Texas). Exhibitors will be personally liable for their own acts and are responsible for obtaining their own insurance. I understand that there will be no refunds on the exhibitor space(s) secured for this event.

I understand that The Lighthouse Church and all related entities, will not be held responsible for loss and/or damage to exhibitor's personal property caused by any reason and I will not assert any such claim against them. The Lighthouse Church reserves the right to cancel this event should an emergency arise.

The Lighthouse Church has the right to ask any exhibitor to leave the conference if they have misrepresented information on this application, or if their product or conduct is deemed inappropriate to this event. By signing below, I agree to the terms and conditions of this contract and confirm that I have arranged to have or already have the appropriate vendor's insurance/permits required for this event.

Signature

Date

**Please complete the Exhibitor Application Form, sign and return by  
email to: [marketing@lhhouston.church](mailto:marketing@lhhouston.church)  
For questions or additional information, please call 281-741-3693**