

WINTERAIL 2025 DEALER CONTRACT - March 15, 2025
Corvallis High School Student Center
1400 NW Buchanan Avenue
Corvallis, OR 97330

Dealer Name:	Firm Name:
Address:	Phone:
City, State & Zip:	E-Mail:
NAME OF HELPER:	

Please reserve _____ 8-foot DEALER tables @ \$60 per table with 2 chairs.

Please reserve _____ 8-foot NON-PROFIT/HISTORICAL ORGANIZATION tables @ \$50 per table with 2 chairs.

All non-profit groups must provide proof of non-profit status.

ELECTRICAL OUTLET NEEDED? YES ____ NO ____

Please note all tables are indoors. Winterail reserves the right to accommodate requests based on available space at the time the request for tables is received

SPECIAL REQUESTS:

All dealers/organizations: What are you selling / promoting?

Please note, Oregon does not have state sales tax.

THANK YOU FOR YOUR PARTICIPATION AND COOPERATION

Return this form with your check payable to:

Victor D. Neves
Winterail
P.O. Box 944
Albany, OR 97321

Phone: 541-971-5110

E-Mail: producer@winterail.com

Note: Please submit reservation requests through the U.S. mail only. Questions regarding tables may be submitted by E-mail.

If you would like a written confirmation, please include a self-addressed stamped envelope. Otherwise, all confirmations will be sent via email.

Winterail Office Use: Date check received: _____ Amount \$ _____ # of Tables _____
 Date confirmation sent: _____ Via Email _____ U.S. Mail _____
 Dealer is number _____ on the waiting list.

Please keep a copy of this contract for your records.