WINTERAIL 2027 DEALER CONTRACT - March 20, 2027
Russell Tripp Performance Center, Linn Benton Community College
6500 Pacific Blvd SW; Albany, OR 97321

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

Please reserve _____ 8-foot DEALER tables @ $50 per table with 2 chairs.

Please reserve _____8-foot NON-PROFIT/HISTORICAL ORGANIZATION tables @ $40 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?

Check/Money Order for $_____ is enclosed.

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 **Phone: 541-971-5110**
P.O. Box 944
Albany, OR 97321 **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.