

# EXHIBTOR BOOTH RESERVATION FORM

## Applicant Information

Business/Organization Name:		
Contact:	Position:	
Address:		
City:	Prov:	Postal Code:
Phone:	Fax:	Cell:
Website:		
E-mail:		

**BOOTH PURPOSE:** Please provide brief summary of your organization and booth.

EXHIBIT SPACE RATES: Booth space is per 10 X 10 area.	No.	Total
Domestic animal rescue organizations – Quiet adoptable animals welcome	\$25	
Non-profit organization	\$50	
Vendors	\$100	
Sponsors over \$100/or those providing a speaker presentation/or stage show	Free	
Money order/cheque to: <b>WRSOS - GONE WILD FOR WILDLIFE</b>  Mail to: <i>GONE WILD FOR WILDLIFE</i> PO Box 24004, Midtown PO Saskatoon, SK, S7K 8B4	<b>Total Remitted</b> Registration deadline Jan. 12. Fees must be paid in full prior to event day. <b>Deadline is January 26, 2018 for payment</b>	

<input type="checkbox"/> <b>Visa</b>	<input type="checkbox"/> <b>Mastercard</b>	<input type="checkbox"/> <b>AMEX</b>
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**Special Requests:** Identify if you have any special needs for your booth (i.e. electrical). WRSOS will work with you to accommodate your needs, where able and if necessary for a fee. Use extra sheet if more space is needed.

**Live Animals:** Please check if you will be bringing live animals to display. Attach a list of the no., type(s) and a summary of their use and care during the event (for the public to touch, take pictures with, etc.)  
 NB: Signing this form, indicates acceptance of the terms of the *WRSOS Policy on Live Animals*.

I will donate an item to the GONE WILD FOR WILDLIFE silent auction, the proceeds of which to supporting the work of the Wildlife Rehabilitation Society of Saskatchewan.

APPLICANT'S SIGNATURE: I have read, understood, and agree to comply with all items within this application, including the EXHIBITOR INFORMATION AND POLICIES. I understand that if I do not comply with any of these terms, I may be asked to leave the premises immediately and will not be entitled to a refund of fees paid.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Applicant

Application Denied _____	Eligible for Refund _____	Amount of Refund _____	Cheque # _____
Application Approved _____	Amount Received _____	Receipt # _____	
Inv# _____			

## Silent Auction Donation Form

Donor Information		
Business/Booth Name:		
Contact:	Position:	
Address:		
City:	Prov:	Postal Code:
Phone:	Cell:	
E-mail:		

Donation Information			
Type of donation		Donation delivery	
	Cash		Attached
	Merchandise		Will deliver
	Services		Needs to be picked up
	Gift certificate		I will contact to arrange
Please indicate approximate fair market value of item:			
Please specify any conditions or restrictions(i.e. minimum bid):			

WRSOS Contact Information	
Mail:	Phone / EMAIL
Wildlife Rehabilitation Society of Sask. PO Box 24004, Midtown Postal Outlet Saskatoon, SK, S7K 8B4	Sheri Hodgson 306-349-1661 cell or 306-232-5949 evenings <a href="mailto:sheri.wrsos@hotmail.com" style="color: blue; text-decoration: underline;">sheri.wrsos@hotmail.com</a>

\_\_\_\_\_ **Tax Receipt Requested** (Where able, WRSOS is pleased to provide a tax receipt. Wildlife Rehabilitation Society of Saskatchewan is a registered charity, no. 899049399 RR0001). Note the following:

- *Donation /Income Tax Receipts are subject to the rules set out by Canada Revenue Agency*
- *Donations of service cannot be acknowledged by issue of an official Income Tax Receipt*
- *Donations of gift certificates or gift cards cannot be acknowledged by issue of an official Income Tax Receipt unless purchased and then donated.*
- *Items must new to qualify for a receipt*
- *Receipts issued for items over \$20 value*