



GREAT AMERICAN INSURANCE GROUP / USDF REGION 3 DRESSAGE CHAMPIONSHIPS

**October 7-9, 2022
Georgia International Horse Park, Conyers, GA**

Vendor Application

Business Name _____
Contact _____ **Type of Business** _____
Address _____ **City** _____ **State** _____ **Zip** _____
Email _____ **Phone** _____
Website _____

Do you require electricity? _____ **Yes** _____ (limited availability at extra charge through horse park)

Description of booth or vendor space (please include anticipated arrival date and time):

Please select type of vendor space

<input type="checkbox"/> Outside Truck & Trailer Location \$300 <ul style="list-style-type: none"> • Roadside location for trucks/trailers only <ul style="list-style-type: none"> ○ Roadway on either side of covered arena ○ Roadway adjacent to Arenas 5, 6, 7 and by Barn 1 	<input type="checkbox"/> Inside Vendor & Exhibitor Building \$550 <ul style="list-style-type: none"> • 12 x 12 spaces available • Climate Controlled • Locked at Night • Electrical drop additional charge • Located near: Videographer, Photographer, USDF Awards, Ribbons, Tests and Scores
<input type="checkbox"/> Art Show Space <ul style="list-style-type: none"> • Designated space for art vendors 	<input type="checkbox"/> Vendor Tents \$250 <ul style="list-style-type: none"> • Located adjacent to the show office and inside the vendor building • 10' x 10 spaces • Must supply own tent. • No electricity included
<input type="checkbox"/> Outside Arena Table Top \$200 <ul style="list-style-type: none"> • 8' table top • No electrical drop available 	<input type="checkbox"/> Courtyard Trailer Parking \$200 <ul style="list-style-type: none"> • Located in courtyard centered in main barn area • Adjacent to shavings ordering location

Merchant vendors agree to release GDCTA and Georgia International Horse Park for personal liability, loss or damage to exhibit or goods in connection with this event. Vendors also agree to abide by Georgia International Horse Park rules and understand that management has the right to revoke vendor privileges for any infractions. By signing this application, vendor acknowledges that they have read this statement and agree to it.

Signature _____

Make check payable to GDCTA or pay by credit card and mail to: Peter West 20 Wild Turkey Lane, Jasper, GA 30143	Name on credit card _____ Card # _____ Exp Date _____ Security Code _____ Card type _____
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Contact Caren Caverly at 770-713-4025 or ccaverly@comcast.net for more information
www.GDCTA.Wildapricot.org

Must be received by September 23rd to be included in the Program