



The National Quilting Association, Inc.  
**43<sup>rd</sup> Annual Quilt Show**  
**June 14-16, 2012 Columbus, Ohio**

Make a copy for your records.

**VENDOR APPLICATION**

Date \_\_\_\_\_

Business Name \_\_\_\_\_

Proprietor \_\_\_\_\_ Title \_\_\_\_\_

Email (all communications about show will be sent by email) \_\_\_\_\_

Business Mailing Address (**contract** and vendor's guide will be mailed here)

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Business Phone \_\_\_\_\_ Additional phone \_\_\_\_\_

Business website URL \_\_\_\_\_

Contact name (if not proprietor) \_\_\_\_\_ Contact's email \_\_\_\_\_

Contact's phone number \_\_\_\_\_  Send emails to both proprietor and contact

Please describe your booth and list items to be sold, including fabric manufacturers (a detailed list benefits all in the selection process), specialty:

\_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_ continue on back

- \*\* Check your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice booth type (standard/sponsor & regular/sponsor/endcap) and circle size requested.
- \*\* Requests for corner, sponsor, and sponsor end cap booths will be postmark sensitive. End caps are 20' or 40' only.
- \*\* Please send the deposit amount for your first choice. Booth fees and deposit amounts are listed on the 2012 Booth Information sheet. We will make every attempt to honor your first choice.

	1ST CHOICE					2ND CHOICE					3RD CHOICE				
	REGULAR		CORNER		ENDCAP	REGULAR		CORNER		ENDCAP	REGULAR		CORNER		ENDCAP
STANDARD (CHECK)					n/a					n/a					n/a
or SPONSOR (CHECK)															
SIZE (CIRCLE)	10	15	20	30	40	10	15	20	30	40	10	15	20	30	40

**Deposit enclosed:** \$ \_\_\_\_\_ (If you are not selected for participation, your deposit will be returned.)

Application submitted by \_\_\_\_\_

Signature

Title

Return completed application and booth deposit check, *payable to NQA*, to:  
**NQA Show Vendor Coordinator, P.O. Box 12190, Columbus, Ohio 43212-0190**  
**Call the NQA Office at 614-488-8520 for Visa or Mastercard payments; fax 614-488-8521**  
**Questions: Contact Judy Vertikoff [jvertiko@columbus.rr.com](mailto:jvertiko@columbus.rr.com) or 614-263-5231**

<b>Office Use:</b> Date App. Rec'd _____	Deposit \$ _____	Bal. Due \$ _____	Date Paid _____
Contract Rec'd <input type="checkbox"/>	Booth Conf. Form Rec'd <input type="checkbox"/>	Booth number _____	