

Date ___/___/___

I-CON 22 Dealer Reservation

I-CON 22 will be held on March 28 - 30, 2003 (Tentative)

All Contacts/Mailings/Mailing List

Dealer's Information

Company / Public Contact	Dealer / Home
Name:	Name:
Address:	Address:
Extra:	Extra:
City, State, Zip + 4:	City, State, Zip + 4:
Phone:	Phone:
Best Time to Call:	Best Time to Call:
Web Site:	Email (business):

Number of Tables Requested: [] ←

Special Needs: Please rank 1, 2, and 3
 Wall [] Electricity [] Position []
 Do You Want the Same Location? Y/N [] (not guaranteed)

Do You Absolutely Need A Wall? Y/N []

Special Considerations:
(Diagram on Back if Needed)

Tax ID# _____ How many Cons do you attend per Year? []

What Does Your Company Sell? (Check All That Apply)

Art Prints	<input type="checkbox"/>	Books	<input type="checkbox"/>	Comics	<input type="checkbox"/>	Dr. Who	<input type="checkbox"/>	Jewelry	<input type="checkbox"/>
Games	<input type="checkbox"/>	Models	<input type="checkbox"/>	Photo Prints	<input type="checkbox"/>	Star Trek	<input type="checkbox"/>	Video	<input type="checkbox"/>
Weapons	<input type="checkbox"/>	Other (describe): _____							

- Notes:
1. What will you bring? [] Video/TV [] Computer [] Other Equipment _____
 2. We require a copy of your NYS sales tax certificate. If you don't have one, call NYS Tax Department at 1-800-972-1233.
 3. Tailoring to your special requirements is on a first-come, first-served basis and is at the discretion of the Dealer's Room Coordinator. No requests will be filled until full payment is received.
 4. Any dealer that does not arrive at the appointed set-up time may be moved from their original table assignments to another location which *may not* satisfy their requests.
 5. In no event will I-Con be liable for any loss of equipment, revenues, or other indirect damages however caused.
 6. Please note this reservation form is not a contract.
 7. In order to hold a reservation, we must have a check for one in every three tables requested (until January 15, 2003).
 8. All tables must be paid in full prior to the convention. No checks for unpaid tables will be accepted at the convention.
 9. Unpaid tables will rise in price as per the schedule.
 10. There will be no transfer of tables without the approval of the Dealer's Room Coordinator.

Rec#:	Index#:	FSA Form:	Tax Cert.:	Fee:
DATE	CASH/CHECK#	AMOUNT	BALANCE	