

Astronomicon 13

Rochester's Science Fiction Convention Dealer's Application

Name: _____
 Name of Business: _____
 Address: _____
 Phone #: _____
 Tax #: _____
 Type of Merchandise: _____

I would like ___ tables in the dealers' room at \$75.00 each (includes 1 membership per table)
 (Maximum of 3)

Oct. 29-31,
2021

I would like ___ additional memberships at \$25 (until 7/30/2021)
 \$45 (until 9/31/2021)
 More (at the door)

Memberships are for: _____
 (List names, please) _____

I need: Electricity _____ Center Island _____
 (circle) Wall Space _____ Corner Space _____
 Other _____ (please describe)

Information about:
 Advertising in the program book
 In-store membership sales at my establishment
 Hotel rates
 Art show
 Other _____ (please describe)

| | Number | Cost Each | Total |
|------------------------------------------------|--------|-----------|-------|
| Tables | | \$75.00 | |
| Memberships | | | |
| Total Cost (payable in U.S. Funds ONLY) | | | |

Amount Enclosed: _____ .00

Date: _____

Signature: _____

| Open | Close | Breaks (list times or none) |
|----------|-------|-----------------------------|
| Friday | to | |
| Saturday | to | |
| Sunday | to | |

Make Checks Payable To:

Rochester Fantasy Fans

P.O. Box 23201

Rochester, NY 14692-3201

www.rochesterfantasyfans.org

Inquiries:

Dealers@astronomicon.info