



COMPANY / INTERNAL CONTACT

ADDRESS

CITY/STAT/ZIP

PHONE

E-MAIL

EVENT CONTACT NAME

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# 2018 MIDWAY VENDOR SPACE RENTAL AGREEMENT

RETURN COMPLETED FORM TO: VENDORS@MFGSERIES.COM OR FAX (816) 817-1011 | FOR QUESTIONS CALL 816-246-8866

Write an [X] next to the Menards Chevy Shows you will be attending

Circle size of each event attending & place total on far right

**MENARDS CHEVY SHOW**

| ATTENDING    | VENUE                     | LOCATION        | DATE      | 20'                           | 40'    | 60'    | 80'    | 100'   | 150'   | TOTAL |  |
|--------------|---------------------------|-----------------|-----------|-------------------------------|--------|--------|--------|--------|--------|-------|--|
|              | VIRGINIA MOTORSPORTS PARK | PETERSBURG, VA  | MAY 18-20 | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | SOUTH CAROLINA MOTORPLEX  | ORANGEBURG, SC  | JUN 2-3   | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | TEXAS MOTORPLEX           | ENNIS, TX       | JUN 9-10  | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | MAPLE GROVE RACEWAY       | READING, PA     | JUL 13-15 | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | BANDIMERE SPEEDWAY        | DENVER, CO      | AUG 5     | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | DARLINGTON DRAGWAY        | DARLINGTON, SC  | SEP 8-9   | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | KCI CRUISE CAR SHOW       | KANSAS CITY, MO | SEP 22    | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | BRISTOL DRAGWAY           | BRISTOL, TN     | SEP 28-30 | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | US 90 DRAGWAY             | MOBILE, AL      | OCT 12-13 | \$ 300                        | \$ 400 | \$ 500 | \$ 600 | \$ 700 | \$ 800 |       |  |
|              | AUTO CLUB FAMOSO RACEWAY  | BAKERSFIELD, CA | NOV 3-4   | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | NO PROBLEM RACEWAY        | BELLE ROSE, LA  | NOV 10    | \$ 300                        | \$ 400 | \$ 500 | \$ 650 | \$ 700 | \$ 800 |       |  |
|              | ACE CAFE ORLANDO          | ORLANDO, FL     | NOV 17    | CALL 816-246-8866 FOR DETAILS |        |        |        |        |        |       |  |
| <b>TOTAL</b> |                           |                 |           |                               |        |        |        |        |        |       |  |

|                     |              |      |    |      |
|---------------------|--------------|------|----|------|
| PAYMENT METHOD      | (Circle One) | VISA | MC | DISC |
| NAME ON CARD        |              |      |    |      |
| CARD #              |              |      |    |      |
| EXP DATE / SEC CODE |              |      |    |      |

Charges applied 30 days prior to selected events. All payments must be settled in advance of each event.

SEE PAGE 2 FOR CANCELLATION POLICY & VENDOR GUIDELINES

| FOR OFFICE USE ONLY |  |
|---------------------|--|
| DATE REC'D          |  |
| BY                  |  |
| PAYMENT             |  |
| INSURED             |  |

# MENARDS CHEVY SHOW VENDOR GUIDELINES

## **VENDORS ARE REQUIRED TO HAVE LIABILITY INSURANCE AT EACH EVENT.**

- Comprehensive limits listed on the policy must cover \$1,000,000 for each occurrence, \$2,000,000 general aggregate
- Two (2) Certificates of liability are required naming Manufacturers Series, LLC and host venue as additionally insured parties
- Insurance can be purchased at [www.fastcov.com](http://www.fastcov.com) to cover event participation

## **QUESTIONS**

Call Forward Sports  
Marketing  
816-246-8866

### **CONTRACT**

The Space Rental Agreement form must be filled out completely and returned by e-mail or fax to the contact information listed on the form. Credit Cards will be charged approximately thirty (30) days prior to the event. **ALL CHECKS SHOULD BE PAYABLE TO THE HOST VENUE.**

### **CANCELLATION POLICY**

No refunds issued TEN (10) DAYS prior to the scheduled event upon cancellation. You may transfer paid reservation to another event on the schedule. **NO REFUNDS FOR NOT SHOWING.**

### **MIDWAY VENDORS**

Midway vendors are only permitted to sell NEW merchandise. The sale of guns, knives, martial arts weapons, fireworks, ammunition, adult items, drug paraphernalia is prohibited. Food or beverage items must be arranged through each host venue directly.

**SWAP MEET VENDORS** Swap meet vendors are only permitted to sell USED merchandise. The sale of guns, knives, martial arts weapons, fireworks, ammunition, adult items, drug paraphernalia is prohibited. **CONTACT VENUE DIRECTLY FOR SPACE.**

### **SETUP & TEAR DOWN**

Menards Chevy Show staff will send event specific setup details 7-10 days prior to the event. Display setup shall be completed by 5:00 PM on the designated setup day. Tear down of displays is not permitted until 5:00 PM on the last day of the show unless instructed by on-site staff.

### **SPACE ASSIGNMENTS**

Vendor space assignments will be assigned in order of receipt of reservation and payment. Assignments will be made in the following priority: 1. Sponsors 2. Vendors pre-registered and paid in full for multiple events. 3. Vendors pre-registered and paid in full for a single event. We will work individually with vendors to handle special requests.

### **DISPLAY SPACE REGULATIONS**

Spaces are traditionally 20' in depth at most facilities. Dimensions can vary at each facility. Sponsors and vendors are required to maintain display space in a neat and professional manner. If a vehicle is used for display or storage, vendors are required to purchase sufficient space to accommodate. All display elements must fit in the assigned space and not encroach on walkways or other displays.

### **CREDENTIALS AND PARKING**

Credentials will be issued on setup day upon arrival, verification of payment and signature of waiver and release form. Credentials for workers based on display size:

10-30 feet = 4 credentials and 2 parking passes

40-60 feet = 6 credentials and 3 parking passes

70 feet + = 8 credentials and 4 parking passes

### **APPAREL SALES**

Apparel Sales are prohibited at Menards Chevy Show events per an exclusive merchandise agreement with Green Mountain Monogram for apparel sales at all events. No vendor will sell hats, shirts or other apparel without written approval from Menards Chevy Show. The Menards Chevy Shows reserve the right to have a vendor remove any competing merchandise.

### **GENERATORS**

If electricity is needed, vendors must supply their own generators.

### **SPECIAL TAX**

**Vendors are responsible for charging the appropriate sales tax at each event**

**Vendors attending events at Virginia Motorsports Park must obtain a Special Event Vendor License for an additional fee prior to the event.**



# CERTIFICATE OF LIABILITY INSURANCE

OP ID: LS

DATE (MM/DD/YYYY)  
03/26/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|                               |                       |                |
|-------------------------------|-----------------------|----------------|
| PRODUCER                      | CONTACT NAME:         |                |
|                               | PHONE (A/C, No, Ext): | FAX (A/C, No): |
|                               | E-MAIL ADDRESS:       |                |
| INSURER(S) AFFORDING COVERAGE |                       | NAIC #         |
| INSURER A:                    |                       |                |
| INSURER B:                    |                       |                |
| INSURER C:                    |                       |                |
| INSURER D:                    |                       |                |
| INSURER E:                    |                       |                |
| INSURER F:                    |                       |                |

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE               | ADOL SUBR INSR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                |
|----------|---------------------------------|--------------------|---------------|-------------------------|-------------------------|---------------------------------------|
| A        | GENERAL LIABILITY               | X                  |               | 09/06/2013              | 09/06/2014              | EACH OCCURRENCE \$ 1,000,000          |
|          |                                 |                    |               |                         |                         | \$ 100,000                            |
|          |                                 |                    |               |                         |                         | \$ 5,000                              |
|          |                                 |                    |               |                         |                         | \$ 1,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 2,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 2,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 1,000,000                          |
| A        |                                 |                    |               | 09/06/2013              | 09/06/2014              | \$ 1,000,000                          |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
| B        |                                 | N/A                |               | 09/07/1914              | 09/07/2013              | \$ 500,000                            |
|          |                                 |                    |               |                         |                         | E \$ 500,000                          |
|          | DESCRIPTION OF OPERATIONS below |                    |               |                         |                         | E L DISEASE - POLICY LIMIT \$ 500,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
ADDITIONAL INSURED -VENDORS FORM CG7139 IS APPLICABLE PER ATTACHED.

|  |   |
|--|---|
| CERTIFICATE HOLDER   | CANCELLATION  |
| <b>MANUFACTURERS SERIES, LLC.</b><br>7815 KARL MAY DR<br>WACO, TX 76708<br><br><b>CERTIFICATE HOLDER 1: MANUFACTURERS SERIES, LLC.</b> | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE |

ACORD 25 (2010/05)

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# CERTIFICATE OF LIABILITY INSURANCE

OP ID: LS

DATE (MM/DD/YYYY)  
03/26/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|                               |                       |                |
|-------------------------------|-----------------------|----------------|
| PRODUCER                      | CONTACT NAME:         |                |
|                               | PHONE (A/C, No, Ext): | FAX (A/C, No): |
|                               | E-MAIL ADDRESS:       |                |
| INSURER(S) AFFORDING COVERAGE |                       | NAIC #         |
| INSURER A:                    |                       |                |
| INSURER B:                    |                       |                |
| INSURER C:                    |                       |                |
| INSURER D:                    |                       |                |
| INSURER E:                    |                       |                |
| INSURER F:                    |                       |                |

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE               | ADOL SUBR INSR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                |
|----------|---------------------------------|--------------------|---------------|-------------------------|-------------------------|---------------------------------------|
| A        | GENERAL LIABILITY               | X                  |               | 09/06/2013              | 09/06/2014              | EACH OCCURRENCE \$ 1,000,000          |
|          |                                 |                    |               |                         |                         | \$ 100,000                            |
|          |                                 |                    |               |                         |                         | \$ 5,000                              |
|          |                                 |                    |               |                         |                         | \$ 1,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 2,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 2,000,000                          |
|          |                                 |                    |               |                         |                         | \$ 1,000,000                          |
| A        |                                 |                    |               | 09/06/2013              | 09/06/2014              | \$ 1,000,000                          |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
|          |                                 |                    |               |                         |                         | \$                                    |
| B        |                                 | N/A                |               | 09/07/1914              | 09/07/2013              | \$ 500,000                            |
|          |                                 |                    |               |                         |                         | E \$ 500,000                          |
|          | DESCRIPTION OF OPERATIONS below |                    |               |                         |                         | E L DISEASE - POLICY LIMIT \$ 500,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
ADDITIONAL INSURED -VENDORS FORM CG7139 IS APPLICABLE PER ATTACHED.

|  |   |
|--|---|
| CERTIFICATE HOLDER                           | CANCELLATION  |
| <b>CERTIFICATE HOLDER 2: HOST RACE TRACK</b> | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE |

ACORD 25 (2010/05)

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