**Rotary District 5000 Conference**

**May 10 – 12, 2024**

**Kauai Beach Resort, Kauai**

**HOUSE OF FRIENDSHIP APPLICATION**

**Application Information:**

**NAME OF ORGANIZATION:       NAME OF POINT OF CONTACT:**

**ADDRESS:       CITY:** **STATE:** **ZIP:**

**PHONE:       EMAIL:**

**Exhibition/Display Information:**

Guidelines

1. No cooking/heating demonstrations allowed.
2. Display items must be free-standing - hanging/attaching to walls or ceiling not permitted.
3. Vendor/Exhibitor is responsible for securing materials and/or merchandise - HOF room will be secured during closed hours and overnight. However, D5000 is not responsible for unattended items.
4. Any material shipments/delivery to the Outrigger Kauai Beach Resort and all loading/setup/clean-up of displays is the responsibility of the Vendor/Exhibitor.

Set-up: Friday, May 10, 10:00 A.M. to 11:30 A.M. (Orchid Room). Event opens at noon, 12:00 P.M.

Take down: Sunday, May 12, 2:00 P.M.

**TITLE OF DISPLAY:**

**DESCRIPTION OF ACTIVITIES:**

**CHECK ALL THAT APPLIES:** **[ ]  Information Only (Brochures, Pictures)** **[ ]  Book Signing** **[ ]  Demonstration**

**[ ]  Sales (specify merchandise):** **[ ]  Other (describe):**

**Power Outlet Need(s):**

|  |  |  |  |
| --- | --- | --- | --- |
| **ITEM POWER OUTLET NEEDED?** | **PRICE** | **QUANTITY** | **COMMITMENT** |
| **DISPLAY ONLY Table:** **[ ] YES** **[ ] NO** | **$50.00** |  | **$**  |
| **ITEMS FOR SALE Table: [ ] YES [ ] NO** | **$50.00** |  | **$**  |
| **ITEMS FOR SALE Table (1 Day Only): [ ] YES [ ] NO** | **$50.00** |  | **$**  |

**Payment Type:**

**[ ]  Credit Card:** **[ ]  MasterCard** **[ ]  Visa Cardholder Name:**

 **Card Number:** **Exp Date:** **CCV Code:** **Amount Charged:**

 **Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notes:**

**[ ]  Check:** Make check payable to: **Rotary District 5000.**

Mail check to: **Rotary District Conference, Attn: HOF, P.O. Box 3325, Honolulu, Hawaii 96801**

**[ ]  Online: Go to rotaryd5000.org/districtconference to register and pay online**

By signing below, I have read and agree to abide by the guidelines specified above, as well as additional policies put forth by the Outrigger Kauai Beach Resort staff and/or management. I also agree to pay in full the total commitment by April 30, 2024.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Questions? **Contact House of Friendship Chair Josie Cortez |backyardcoffee@yahoo.com | 901.732.1198**