

Hi WIGC 2020 Exhibitors!

We are excited to have you all at conference and be a part of our tradeshow for WIGC 2020!

As mentioned on the Exhibitor form, the booth will consist of one 8ft table and two chairs.

Please see attached and below for vendor shipping and power requests.

Please fill out both sets of forms requested by Sycuan Casino Resort in the Exhibitor Kit and the form requested by CNIGA. Both sets of forms are required to exhibit at the WIGC 2020 Conference.

Schedule for Exhibitors is as follows:

Exhibitor Move-In:	Tuesday	February 11 th , 2020	8:00am to 4:30pm (<u>For any booths located in Heritage I & II</u>)
			TBD – 10pm (<u>For any booths located in Heritage III</u>)
Exhibitor Open:	Wednesday	February 12 th , 2020	12:00pm-5:00pm
	Thursday	February 13 th , 2020	9:00am-12:00pm
Move Out:	Thursday	February 13 th , 2020	12:30pm-5:00pm

If you have any questions, please let me know. If you are looking for furniture rental, please let me know as well.

Thank you!



25th Annual Western Indian Gaming Conference

February 11 - 13, 2020
Sycuan Casino Resort
5469 Casino Way
El Cajon, CA 92019

Exhibitor Registration Form

Please print or type legibly.

A: Organization Name, as it will appear in the show program

Company Name: _____
Street: _____ City: _____ State: _____ Zip: _____
Phone: () _____ Email: _____
Contact person: _____ Title: _____

B: Exhibit Costs per 8ft table, two chairs, and one conference pass – Show dates are February 12th & 13th, 2020

<u>Associate Member Exhibitors:</u>		<u>Exhibitors:</u>	
1 Booth:	\$1,200 per booth	1 Booth:	\$1,400 per booth
Before Dec 13th	\$1,000 per booth	Before Dec 13th	\$1,200 per booth

Please reserve _____ (Qty) booths @\$ _____ = \$ _____

We WOULD LIKE to be near the following exhibitors: _____

We DO NOT wish to be near the following exhibitors: _____

***Note: The Western Indian Gaming Conference will attempt to comply with your request(s); however, in no way is guarantee implied since WIGC reserves the right to assign all space. All WIGC decisions are final.

Location preferences: (reference to floor plan numbers)

Booth Location: 1st Choice # _____ 2nd Choice # _____ 3rd Choice # _____

Associate Members and major sponsors are given first priority of booth selection. All other vendors are given second priority. **No booth assignments will be made until complete payment is received.*

C: Event Sponsorship Opportunities

We are interested in the following opportunities. Please provide further information:

_____ Advertising in WIGC Show Guide or WIGC App _____ Poker Tournament
_____ Bowling Tournament
_____ Event Sponsorship

D: Method of Payment

 Visa MasterCard AmEx

Card # _____ Exp: _____ Security Code: _____

Print name as it appears on card:

Name: _____ Signature: _____

Enclosed is payment of \$ _____, check made payable to CNIGA

E: Signature and Agreement

To ensure accuracy and efficiency, application will not be processed and booth assignment will not occur until full payment is received. I/We understand that all spaces will be allocated in accordance with the procedures in the exhibitor guidelines and that all decisions by WIGC/CNIGA are final. My signature, on behalf of myself and the organization I represent, constitutes agreement to abide by all requirements, restrictions, and obligations noted on this form and on the rules and regulations provided. Application will not be processed without signature and payment.

PRINT NAME: _____ SIGNATURE: _____ DATE: _____



Shipping and Receiving

Due to heightened security and limited storage space, special arrangements must be made for receiving equipment, goods, displays and other materials that will be sent, delivered or brought into Sycuan Casino Resort. Failure to do this may result in deliveries being refused or materials being unavailable when required. Please notify us of any oversized items, so that the appropriate arrangements may be made.

Exhibits **cannot** be received directly by the hotel. Please utilize your drayage company.

All boxes and materials shipped to the hotel for your convention may be delivered **three (3) working days** prior to your meeting dates. Storage fees will apply for items arriving more than three (3) days in advance of group or individual arrival date.

Package storage fees per day as follows:

Letter/small package - \$5 each

Pallet/skid/crate - \$25 each

Our Receiving entrance is open 7:00am - 4:00pm, Monday through Friday.

Any materials being sent to Sycuan Casino Resort must be labeled as follows:

**SYCUAN CASINO RESORT
5469 CASINO WAY
EL CAJON, CA 92019
RECIPIENT'S NAME – GUEST
RECIPIENT PHONE NUMBER
NAME OF ORGANIZATION
DATE (S) OF THE EVENT
NUMBER OF BOXES SHIPPED (I.E. BOX 1 OF #)**

Upon check in, please verify receipt of shipped materials with front office personnel or Conference Service/Catering Manager. Sycuan Casino Resort will not accept packages or shipments arriving C.O.D., cadavers, weapons or explosive materials. Sycuan Casino Resort will refuse any shipments not prepaid and Sycuan Casino Resort will make no notification to the shipper. Additionally, Sycuan Casino Resort assumes no liability for any loss or damage to packages, boxes or shipments received prior to, during or following your event.

UPS and FedEx are our preferred couriers. USPS is also a valid courier, however their Express Service is **not** guaranteed, because parcels are delivered to a San Diego sorting facility before they are delivered to Sycuan Casino Resort. **This can delay USPS packages by up to three (3) days.**

Convention materials shipping/receiving charges apply as follows:

Incoming letter/small package - no charge Incoming box less than 40 lbs. - \$5.00

Outgoing letter/small package - \$5.00 Outgoing box less than 40 lbs. - \$5.00

Incoming box more than 40 lbs. - \$25.00 Incoming pallet/skid/crate - \$100.00

Outgoing box more than 40 lbs. - \$25.00 Outgoing pallet/skid/crate - \$100.00

When shipping materials out from Sycuan Casino Resort, please do not forget your preprinted labels with your account number or applicable shipping charges will apply. Shipping charges may be posted to a master account for authorized group representatives.



Sycuan Gaming Commission

Please submit to Jessica Molnar,
jmolnar@sycuan.com, (619) 445-6002 x1039,
at least 10 business days prior to the start of the event.
(January 27, 2020)

Vendor Registration Form

Business Information

Business Name: _____ Date: _____

Business Trade Name: _____

Address: _____
Street Address *Unit #*

_____ _____
City *State* *ZIP Code*

Phone: _____ Email _____

Products for sale: _____

As a registered vendor, we will comply with all applicable local, State, Federal and Tribal laws, regulations and ordinances.

Name: _____

Title: _____

Signature: _____

Office Use Only

Registered By: _____ On: _____



Exhibitor Order Form

Company Name:			Payment Method: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card (form attached), Last Four Digits: _____
Booth Name:	Booth Number:	Additional Notes:	
Attention:			
On-Site Contact:			
Ordered By:			
Email Address:			
Phone:			
Address:			Please submit to Jessica Molnar, jmolnar@sycuan.com, (619) 445-6002 x1039 by January 20, 2020
City:	State:	Zip:	Sycuan Casino Resort, Attn: Jessica Molnar
Installation Date:	Time:	5469 Casino Way, El Cajon, CA 92019	
Opening Date:	Time:	<i>The customer agrees to pay in full for loss or theft of any equipment provided by Sycuan.</i>	
Removal Date:	Time:	<i>Pre-payment must accompany all orders unless prior arrangements have been made.</i>	

Equipment	Quantity	Daily Cost	Days Used	Subtotal
Power Package				
Exhibitor Power Package Includes: 7 amp circuit, power strip, extension cord		\$105		
Video Packages				
65" Video Package Includes: DVD player with automatic repeat, and 65" LCD monitor on stand		\$450		
LCD Projector Package Includes: Sharp C330 3300 lumen projector, tripod screen, and all cabling		\$640		
Video				
DVD Player		\$90		
6'x6' - 8'x8' White Tripod Screen - Skirted		\$90		
Computer Monitors				
22" LED Computer Monitor		\$135		
27" LED Computer Monitor		\$220		
46" Flat Screen Monitor		\$470		
Tall Monitor Stand		\$50		
55" Flat Screen Monitor		\$655		
PC Laptop Day Rate		\$250		
MacBook Day Rate		\$320		
Box Handling Fees				
Boxes Incoming/Outgoing - Under 40 lbs		\$5/box		
Boxes Incoming/Outgoing - 40+ lbs		\$25/box		
Pallet/Skid/Crate Incoming/Outgoing		\$100/pallet		
Letter/Small Package Incoming		no charge		
Letter/Small Package Outgoing		\$5/per		
Set up /pre-test, removal & sales tax are not included.				
Subtotal				

Additional equipment is available upon request

Firm Name:

Booth Name:

Booth Number:

Power

Please indicate on the grid the location of your power drop(s) using exact measurements and how many amps each power drop should have. If no location is indicated, the power drop will be placed in the middle of the back of the booth. There is a minimum labor charge for hook-up and dismantle of all non-standard locations, multiple outlet locations, island booths and 208V services.

Adjacent Booth No.

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CREDIT CARD AUTHORIZATION FORM

This form has been created in order to allow you to have third party expenses charged to your credit/debit card. Please provide all information requested below to ensure prompt processing of your application. We ask that you please sign and date the form before submission. Also, please provide a copy of the cardholder's driver's license or state issued ID**. Please do not send photocopy of the credit card with this form, as this is against credit card company regulations.

Cardholder Information – Required

Name as it appears on the credit/debit card: _____

Card type: VISA MasterCard Amex Discover

Account Type: Personal Corporate/Company Name: _____

Issuing Bank: _____ Phone #: _____

Card Number: _____

Expiration Date: _____ CVV Code: _____

Billing Address: _____

Billing City, State and Zip Code: _____

Contact Phone Number: _____

Contact Email Address: _____

Guest Information – Required

Individual/Business/Group or Event Name: _____

Reservation Confirmation Number: _____

Arrival or Event Dates: _____

Approved Charges – Required

I hereby authorize the following charges to be applied to the following credit card

Check all that apply:

All Stay Charges (Room, Golf, Food & Beverage and Miscellaneous), \$ _____

Hotel Charges (Room & Tax Only/Guest is on own for Incidentals Incidentals Only Room, Tax & Incidentals), \$ _____

Food & Beverage Charges (Banquets Restaurants Room Service), \$ _____

Spa Charges \$ _____

Golf Charges (Golf Fees Club Rentals Merchandise), \$ _____

Transportation Charges

(Card MUST be on file in case of any client incurred fees – such as excessive cleaning or waiting fees), \$ _____

Lost & Found Shipment (\$25 minimum fee – Fed Ex Express Only), \$ _____

Other: \$ _____ Description: _____

I certify that all information is complete and accurate. I understand that the use of a credit/debit card will directly affect the funds available to me on my credit/debit card and the amount charged to my credit/debit card will be reflected on my credit/debit card statement. I hereby authorize Sycuan Casino Resort to collect payment for all charges as indicated in the "Approved Charges" section of this form by processing a charge to the credit/debit card listed above. I understand that a new form will have to be completed if guest wishes to extend his/her stay. I certify that I am the authorized signer of the credit/debit card listed above.

Cardholder Name (Printed): _____

Cardholder Signature: _____ Date: _____

****MUST INCLUDE A COPY OF YOUR DRIVER'S LICENSE OR STATE ISSUED ID (FOR PERSONAL CREDIT CARDS) ****