

COLUMBUS INTERNATIONAL FESTIVAL

Franklin County Veterans Memorial, Columbus, OH

Saturday & Sunday, November 2 & 3, 2013



Poster Kiosk at the International Festival

We want to have as many international organizations represented at the festival as possible this year!

Since some have found the larger booths to be time and cost prohibitive, we have created a new opportunity of which we hope you will take advantage. It is called a Poster kiosk and costs \$50.00. This offer is available by select invitation only and we hope you will take advantage of this offer.

This would involve a small vertical space (roughly 3' wide by 4' tall) for poster/ banner display and a ledge/table for brochures/literature. This would be an unattended display in a noticeable area of the festival and would provide your organization the chance to be recognized by the hundreds of visitors.

Each organization would be responsible for providing the poster/banner display items and whatever brochure/literature you would like available for visitors. The Festival will not be responsible for security of any items in these locations beyond maintaining that the materials are respected.

Deadline is November 01, 2016. To reserve your spot, send total payment with completed application (following page) to:

Please make check payable to
"Columbus International Festival"

Columbus International Festival
PO Box 340272
Columbus, OH 43234

Deliver your components, ready for installation, to Festival coordinator at the Celeste Center on Friday, Nov 11, between 2pm and 7pm.

Contact 614.735.2848 to coordinate further details.

You may pick up you items after the festival closes at 8pm on Sunday, Nov 13. The Festival staff will not be responsible for materials not recovered.



Columbus International Festival

Dr. J.S. Jindal, Festival Chair

Franklin County Veterans Memorial, 300 W. Broad St., Columbus, OH 43215



Saturday & Sunday, November 12 & 13, 2016

KIOSK APPLICATION <i>Type into MS Word form or print clearly</i>			
Name of Organization or Business			
Name of Person Responsible for Booth		Email	
<i>Is the address information listed for the <input type="checkbox"/>organization or <input type="checkbox"/>contact person? Check one</i>			
Street Address		City	State Zip
Phone		Cell Phone	

This 2-day event is to bring joy and entertainment to you and your family at very economical expense. We would like everyone to experience the diversity of cultures. For that reason, exhibitors may not display material that is critical or disparaging of any country, government, people, individual, culture, religion or organization. Exhibits may not be critical of the history, historical events, actions or political positions of any country, government, people, individual, culture, religion or organization. Exhibits may not deny the precepts of any religion or political position or state that they are not worthy of belief. Items, literature or signs that promote or incite violence are prohibited. Offending literature or items may be removed.

Kiosk Reservations – accepted on a first-come, first-served basis			
Quantity	Description	Cost	Total
	Poster kiosk	\$ 50.00 each	
Total Amount Enclosed With Application			

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Columbus International Festival
PO Box 340272
Columbus, OH 43234

Please visit our web site at www.CIFOhio.org.

For additional information or questions call Dr. Jindal at 614-735-2848.

Exhibitor's Disclosure	
I understand that the Columbus International Festival and its sponsors cannot assume any liability or responsibility for food served or sold by the organization or business I represent or for any accidents connected with my exhibit. The festival does not carry insurance specifically purchased to cover my organization or business. I agree to stay within the confines of my booth.	
I certify that the information on this application is correct and that the organization or business that I represent will abide by the by-laws and rules of the Columbus International Festival.	
APPLICATION DEADLINE IS November 01, 2016.	
Signature of Booth Representative	Date
Name of Organization or Business	
Office Use Only	
Date Application Postmarked: _____ or Received: _____ Payment Received for Booth(s): \$ _____	
Check Number _____	Amount \$ _____