

DISPLAY INFORMATION RETURN FORM Scan & Email

Agency Name (If Applicable):							
Company Name (Name on Actual	<mark>l Displa</mark>	<mark>y</mark>):					
Address:							
Address: City:		St	tate:	Zip:			
Contact – (Pre-Event): <mark>(Please put the name of the pers</mark> e							
Phone #:	on wno	wiii be na	ndling Pre-Even	t details)			
E-Mail:							
On-Site Contact:	il:Cell phone #_ te Contact:Cell phone #_ se put the name of the person who will be handling the displa						
(Please put the name of the person	on who	will be ha	ndling the displ	ay at the	event)		
Setup Date:	(D	Displays mu	ıst be set up no	later thar	n end of day prior t	o the 1 st Event	Day of the Weekend
			-				•
Display Footprint Size: How many	y feet V	VIDE:	How m	any feet	DEEP:		
Detailed Description of Display Co	ompon	ents:					
(Please include an overhead diag	ram a	nhotogran	h of the display	and a de	tailed footprint lay	out with dime	nsions
-							isions)
Will your display contain a tent?	YES	NO	Dimensions: _			-	
Renting tent?	YES	NO	Company rent	ing from:			
Bringing your own?	YES	NO					
Will your display contain a trailer	or car	hauler?	YES		NO		
Will a vehicle be a permanent pa			? YES		NO		
If you answered "yes" to one or b	ooth of	the previo	us questions, th	e followii	ng information is R	EQUIRED.	
Make:		Model: _					
Make:		Model:					
					h fire codes I mus	t know this inf	armation aboad of
	_	_	•	Jilipiy wit	ii iiie codes, i iiids	t Kilow tills lille	Jilliation alleau of
time to allow for proper spacing f	from or	ne display	to another.)				
				YES	NO		
Will you be scheduling phone and/or internet service hookups?				YES	NO		
Have you sent CMS a current Certificate of Insurance?					NO		
Additional Information:							



DISPLAY SOUVENIR GIVEAWAY FORM Scan & Email

Company:		
Contact:	Title	e:
Address:		
City:	State	e: Zip:
Phone:	Fax:	
SUBJECT TO APPROVAL PRIOR	TO THE EVENT WEEKEND.	E TO GIVE AWAY, INCLUDING LITERATURE, CANDY ETC. ALL ITEMS ARE
		PT THAT I AM STRICTLY FORBIDDEN TO SELL OR GIVE AWAY ANY SOUVENII EEDWAY MOTORSPORTS INCORPORATED.*
*PLEASE REFER TO ATTACHED	GIVEAWAY GUIDELINES FO	OR SPECIFIC DETAILS ABOUT RESTRICTIONS ON GIVEAWAY ITEMS.
Signed:		Date:
MUST BE SIGNED TO VALIDAT	E CONTRACT.	
*Item must be sent to the CMS product.	account executive for appr	roval at least 2 weeks prior to events. Artwork will suffice in lieu of actual
	•	elty items are not considered approved unless the Director of his form. You may receive a copy of the signed form upon request.
Approved:		
Director of Merchandising & Li	censing	Director of Sales
Date:		Date:

Please return to: Jason Hoyt - Email: jhoyt@charlottemotorspeedway.com