



2018 Summa Health Medina Half Marathon & 5K

Expo Application: Friday, May 25, 2018 3pm-8pm Summa Health Medina Medical Center

3780 Medina Rd, Medina, OH 44256 Set Up: 1pm-2:45. Clean Up: 8pm-9pm

PARKING IS IN THE FAR REAR OF THE MEDICAL CENTER. THERE IS A PLACE TO QUICKLY UNLOAD.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Business Name: _____

Address City State ZIP Code

Phone: _____ Email _____

Agrees to utilize one 8x8 Booth Space \$100 YES NO

Table is provided by the race committee,

Are you selling items? YES NO

Do you need chairs, how many? _____

Are you giving away samples, business cards, etc.? YES NO

VENDOR PROVIDES TABLE CLOTH/COVER.

If yes to above, explain: _____

Payment Information

Please send application with check. Checks made payable to Medina County Road Runners

Mail to: Beth Bugner, 1118 Alexandria Lane, Medina, OH 44256 DEADLINE: April 30th (Or when event sells out)
EVENT HAS LIMITED SPACE, SPOT IS RESERVED WHEN PAYMENT IS RECEIVED

Disclaimer and Signature

*I understand that full payment is required with application. Refunds will not be given if vendor cancels if spot is not filled. Full refunds will NOT be given if cancellation is within 15 days of the event. Vendor agrees to be set up and ready by 3pm on Friday, May 25th. Someone representing the business will staff the table **through the conclusion** of the event. Packing up to leave will begin at 8pm, only earlier if directed by the event staff. It is agreed that the Summa Health Medina Half Marathon, the Summa Health Lake Medina facility, our partners, sponsors, Medina County Runners, and all race officials and volunteers will not be held liable if items are lost or stolen, or for any injuries that occur. By signing below you agree you have read and understand the vendor guidelines.*

Signature: _____ Date: _____

www.runmedina.org medinaHalfMarathon@gmail.com