



OUTDOOR EXHIBIT SPACE APPLICATION
AIRSHO 2025

(Please return this Application with signed Exhibitor Agreement and Deposit or In full)

Company: _____ Contact: _____

Address: _____

Telephone Number (cell): _____

Email: _____

"AIRSHO Square" Space Size _____ x _____ @ \$3.50/square foot \$ _____

4 2-Day Exhibitor wristbands FREE \$ Free

_____ Additional Exhibitor wristbands \$10 each \$ _____

**No electricity provided*

TOTAL \$ _____

Please mail Exhibit Space Application, Deposit/In full, and Exhibitor Agreement to:

High Sky Wing AIRSHO

Attn: Kelley Blackwell

PO Box 61064

Midland TX 79711

Office: (432) 254-6182 or (432) 425-6453 cell Email: kellyblackwell.kb@gmail.com

Set-up: Friday, September 5, 2025: 1:00pm - 6:00pm

Exhibitor Hours: September 6-7, 2025: Saturday & Sunday 9:00am - 4:00pm
 (Earlier set-up must be pre-approved)

Payments: 20% deposit due with application **Balance due:** August 22, 2025

The Vendor will sell/promote the following: _____

Contract to be approved by AIRSHO Committee:

Committee Member: _____ **Date:** _____