

# DIA DE LOS MUERTOS USA

PROUDLY PRODUCED BY THE NAVARRO GROUP

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PRESENTS



# HOUSTON DIA DE LOS MUERTOS

PROUDLY PRODUCED BY THE NAVARRO GROUP

## Arts & Crafts

Phone: 214.600.1533 (text for faster response) 469.412.2154 for Spanish  
 Email: [navarro@navarrogrp.com](mailto:navarro@navarrogrp.com) or [Norma@navarrogrp.com](mailto:Norma@navarrogrp.com) for Spanish  
 Please Print or type, the application must be filled out completely and signed.

**November 4, 2023**

Sam Houston Park

2:00 p.m. – 10 p.m.

Company/Org Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Cell (if different than above): \_\_\_\_\_

<i>EXHIBITOR FEE</i>		
10x10	\$500	\$
10x15	\$750	\$
10x20	\$1,00	\$
TOTAL:		\$

### NEXT STEPS:

- Review all instructions and complete the attached “Check List” and return with this full application.
- Arts & Crafts exhibitor fee does include minimal rentals, electricity outlets are NOT included, unless noted and approved on the attached check list – see attached “Check List” - additional fees may apply.
- The attached “Check List” will detail Exhibitor requirements, credentials, hospitality (if any) and any and all special accommodations to ensure your participation is successful.
  - Approved applications with noted Check List, will then receive an invoice via email to the above contact from DDLM QuickBooks.
- Once the above “Application and Check List” are secured with confirmation of payment, a “Welcome Kit” will then follow, with all legal waivers, rules and regulations and instructions for the respective “Exhibitor Packet Pick Up” to be held the week prior to the respective main event(s).
- The above “Exhibitor Packet” will include, final floor plan assignments, credentials, parking passes and everything needed to again ensure a successful activation.
- Exhibitor fees can be refunded, on a case-by-case basis, pending committee approval; with the understanding that this is a “Rain or Shine” event and that mechanical or staffing issues are void from such refund policy.

Exhibitor Representative Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Arts & Crafts Exhibitor Space Check List

Thank you for participating in the 2023 Houston Dia De Los Muertos Parade and Festival as a Arts & Crafts Exhibitor! If all the below is approved, initial as noted, or make notes on the bottom of the form until all is approved.

As an Pop-Up Exhibitor, you are allocated with only the below:

10X10 Arts & Crafts Exhibitor: \$500.00 Initial Here

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- One (1) parking pass
- Two (2) exhibitor credentials
- One (1) table
- Two (2) Chairs
- One (1) Pop-up Tent permitted

10X15 Arts & Crafts Exhibitor:: \$750.00 Initial Here

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- Two (2) Parking Passes
- Four (4) exhibitor credentials
- Three (3) tables
- Four (4) Chairs
- Two (2) Pop-up Tents permitted
- Two (2) Exhibitor hospitality passes

10X20 Arts & Crafts Exhibitor:: \$1,000.00 Initial Here

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- Two (2) Parking Passes
- Four (4) exhibitor credentials
- Four (4) tables
- Four (4) Chairs
- Two (2) Pop-up Tents permitted
- Two (2) Exhibitor hospitality passes

### Check List Continued:

Preferred Language of Communication: English: \_\_\_\_\_ Spanish: \_\_\_\_\_

Description of your activation (in detail)/ *Descripción de su participación (en detalle):* \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Additional Electrical Rental Needs:**

Please specify what you will be powering if additional power needs are necessary / *Necesidades de energía adicionales: Por favor especifique para que necesita energía adicional:* \_\_\_\_\_  
 \_\_\_\_\_

Additional Cost of: \_\_\_\_\_

**Additional Rentals:**

If additional rentals are needed, please specify below. All rentals will be sourced by the event producers through our preferred vendor / *Rentas adicionales: Si se necesitan rentas adicionales, especifique. Todas las rentas serán provistos por los productores del evento através de nuestro proveedor preferido.* \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional Cost of: \_\_\_\_\_

**From Original Application:**

Company/Org Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Official Use Only: \_\_\_\_\_ Approved by: \_\_\_\_\_  
 Additional Fees of: \_\_\_\_\_ Billed: \_\_\_\_\_ Payment Received: \_\_\_\_\_