

## Minnesota Comic Book Association 2024 FallCon Creator Application

Saturday, October 12th and Sunday October 13th, 2024

MN State Fairgrounds Grandstand, 1265 Snelling Ave, Falcon Heights, MN 55108

## CREATOR INFORMATION (PLEASE PRINT CLEARLY AND FILL OUT COMPLETELY)

Name:				
Business Name:				
Mailing Address :				
City:				
Telephone : ()	E-Mail Address :			
Artists, Writers, and/or Crafters who created				
Note: The MNCBA prohibits at its events the using generative AI.	e display and/or sal	e of all art, merchandise	e, and othe	er works created
Each space is $10' \times 10'$ and includes $18' \times 10'$ Complimentary lunch is provided for Create			l a Table	Sign.
No banners or displays over 10 feet tall.				
<ul> <li>Creator space \$125</li> <li>Additional Table (8' x 30") \$30</li> </ul>		Total Cost = \$		
Special Requests:				
We do our best to accommodate all rea	quests if possible. If there	are issues with your request we	will contact	you.
The Creator selection process is done by a jury of volunteer	rs.			
All creators accepted to exhibit at FallCon 24 will be emaile offered to the next in line. Failure to complete your payment				
Unfilled spots or developing vacancies will be filled on a case	se-by-case basis.			
Promotion on the MNCBA social media accounts is <b>not gua</b> standards being submitted <b>at the time of application.</b>	aranteed, and is continger	nt upon promotional materials th	nat meet MNC	CBA format and quality
<ul> <li>Copyedited, professional biography written in the third</li> <li>One (1) high quality photo of yourself</li> <li>Four (4) high-quality visual representations of your pro</li> <li>See https://www.mncba.org/creator-info.html for comp</li> </ul>	jects and/or work	equirements		
Applications must be completed and paid in full by 31 A	August 2024 to be eligibl	e for promotion on the MNCB	A social me	dia accounts.
LEGAL AGREEMENT—PLEASE READ COMPLET				
Creators shall at all times protect, indemnify, save, and MN State Fairgrounds in its entirety, against any and a from, or by any reason of or act or omission by ret volunteers, owners, or the staff of the MN State Fairgr FallCon, indicates your full and complete Understandin	Il form of loss, cost dam ailer/dealer, his employ rounds. All spaces/table	age, liability or expense. Incl ees or agents, FallCon atter s sales are final. The signing	uding that v ndees/partic	which arises out of, or ipants, MNCBA staff,
By signing this agreement you agree to abide by the website: https://www.mncba.org/policies.html	policies and rules of c	onduct of the MNCBA, whic	h can be fo	und on the following
Your Full Name (Please Print) :				
Your Signature (Required) :		Date:	_ /	/
Send your completed and signed form to:	Minnesota Comic B PO Box 11777	ook Association		

Saint Paul, MN 55111

Or email completed and signed form to: creators@mncba.org