

MULTI-REGIONAL SGNA CONFERENCE

Central ILL, Indiana, Michigan, Wisconsin

VENDOR REGISTRATION FORM

Drury Plaza Hotel – October 20, 2017- October 22, 2017 - **PLEASE PRINT ALL INFORMATION BELOW**

Company Name: _____

Vendor Name(s): _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone #(s): _____

Products to be displayed: _____ ****

*****THIS IS VERY IMPORTANT INFORMATION TO TABLE ARRANGEMENT*****

If confirmation letter is to be forwarded to an address other than the address above, please enter below.

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

_____ Electrical Access needed - (One standard 20 amps, 2 plug electrical outlet will be provided.)
Please provide your own extension cords – there may be a site fee for them.

I am interested in sponsoring:

___ Food/Beverage expense ___ Speaker ___ Educational Grant ___ Door Prize(s)

Contact one of the committee members for specific questions regarding sponsorship.

Diane Thompson	Michigan	Dathompson920@gmail.com
Nancy Denton	Michigan	Nancy.denton@beaumont.edu
Susan Selking	Indiana	aselking@aol.com

- Forward completed: 1) Vendor Registration Form, and 2) check payable to **MULTI-REGIONAL SGNA** in the amount of **\$750.00** by August 1, 2017 to the following committee member:

Diane Thompson
1005 Somerset Lane
Flint, MI 48503

- Register online at <https://multiregional2017.eventbrite.com>