

EXHIBITOR REGISTRATION FORM
35th Annual
Utah Early Childhood Conference
Saturday March 13, 2010

NAME _____ COMPANY _____

EMAIL: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE: WORK _____ CELL _____ FAX _____

PROFIT _____ NON-PROFIT _____

NUMBER OF TABLES NEEDED (6' each) _____

ELECTRICAL NEEDED YES _____ NO _____

SPECIAL NEEDS/INSTRUCTIONS: _____

Will you be giving the conference committee give-a-way prizes for drawings? ___Y ___ N

If yes, how many? _____

VENDOR FEE: (choose correct one)

\$100 per table _____ (Local Companies)

\$200 per table _____ (National Companies)

\$75 per table _____ (Presenters at conference purchasing a vendor space)

\$40 per table _____ (non-profit organizations)

Amount Enclosed: _____ (**Vendor fee x number of tables**)

Please make checks to "UAEYC" and mail along with this form to:

Katie Ricord, Vendor Chair
475 West 260 North
Orem, Utah 84057

WE'RE LOOKING FORWARD TO WORKING WITH YOU!