



Circles of Life Conference 2019

2019 Exhibitor Registration Form

ORGANIZATION NAME: _____

CONTACT: _____ TITLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

E-MAIL: _____ Website: _____

For-Profit Exhibitor - \$500

Non-Profit Exhibitor - \$300

Approved Conference Sponsor

Micro-Enterprise - \$50*

*To qualify as a micro-enterprise exhibitor you must be an individual with disabilities or a parent of an individual with disabilities. All applicants must contact Lynn at Lynn@fvofwi.org to apply as a micro-enterprise.

All exhibitors must register if they plan to attend conference sessions and meals. A reduced conference registration rate of \$100 is available for exhibitors.

Name of people attending and staffing table: Please print clearly

1) _____

2) _____

Electricity is available on a first come first served basis. I need electricity: (Circle one) Yes No

Please make checks payable to **UW Stevens Point** and mail this form and your check to:

**UWSP Continuing Education
2100 Main St, 032 Main Building
Stevens Point, WI 54481**

Credit cards are also accepted! Please contact Sheila at sbannist@uwsp.edu or call **715-346-3838**.