



**Fall WEDA Conference
Local Sponsorship & Exhibitor Registration Form
Holiday Inn Hotel, Manitowoc, WI
October 6-8, 2010**

► EXHIBITOR PACKAGE \$500

- ❖ One complimentary registration PLUS Exhibit/Booth space (pop-up or table top display).
- ❖ Recognition in all conference promotional materials.
- ❖ Signage with your company logo at the event.
- ❖ A link to your Web Site from WEDA's online (www.weda.org) Conference Section.

To be included in the October 2010 WEDA Fall Conference materials, please fax or email this form by August 31, 2010

Contact Name: _____ Title: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Exhibitor (if different from contact): _____ Title: _____

Email: _____

Phone: _____ Fax: _____ Email: _____

Exhibit Information

Will you need electricity? Yes No (Please provide your own power strips & extension cords)

Do you plan to attend (check all that apply): Wed. Bus Tour ___ Wed. Reception ___ Thurs. Breakfast ___ Thurs. Lunch ___

Payment Type: ___ Visa ___ Master Card ___ Check

Credit Card # _____ Exp. Date _____

Name on the Card _____

Email or Fax completed form to: Megan Purtell at weda@weda.org or fax (608) 241-7790. Check Payable to WEDA.