

## Vendor Registration Form – May 1, 2014

Our company is pleased to support the following professional development & networking event by sponsoring a vendor table at the level indicated below.

Company Name	
Phone	Fax
	<del></del>
Signature	
Please indicate the	sponsorship level:
	50 – <i>Includes:</i> 8 ft. skirted table; one ticket to event; logo posted on as vendor with link back to company website.
Tables will be availa skirted table, premi www.abwawny.com	ctive Vendor Table, \$100 – Only a select number of Interactive Vendor ole. Tables are first come, first serve and industry exclusive. <i>Includes:</i> 8 ft. Im vendor location, two tickets to event, logo posted on as Exclusive Interactive Vendor with link back to company website as well shout the event based upon the interactive presentation.
Please indicate who [ ] Yes, I need electronic [ ] No, I do not need	•
Payment: Please make check payo	ble to ABWA Western New York. All payments must be made prior to the event date.
Check No.	Amount of Check
Please mail paymen	and form to:
	AWBA Western New York
	Charter Chapter
	PO Box 106

Niagara Falls, NY 14304
\* If you would like to pay for your sponsorship with a credit card, please visit www.abwawny.com