



Exhibitor/Booth Application

Application Deadline: Nov. 20, 2020 • YOU MUST COMPLETE THE ENTIRE APPLICATION

Are you a Conference Sponsor? Yes No

Are you an active Committee Member? Yes No

Organization Name: _____ Contact Person: _____

Email Address: _____ Phone: _____

Web Site of Organization or Business: _____

Exhibit Category (check all that apply):

HEALTH PRODUCTS FOR SALE ECO GREEN ENVIRONMENT MISC. SERVICE

Will you be selling products or services? Yes No Do you have a Pasadena sales tax # Yes No

Please describe product(s) or service(s): _____

PLEASE CHECK ONE:

Booth only = \$500

Booth + ½ page ad = \$1,500

Booth + full page ad = \$2,500

• Each Exhibitor portal must be staffed at all times. How many staff will be at your portal? _____

• Box Lunch Yes No If yes, please check a box: One Lunch Two Lunches
(If you have more than 2 staff for your booth, there is an additional charge of \$50 per person, which will cover lunch.)

• Is there any information regarding your virtual exhibit that we need to be informed about? Yes No
Please describe: _____

Please make your check payable to: Community Women Vital Voices and mail to: CWVV c/o Gerry Sudduth, P. O. Box 40371, Pasadena CA 91114 (If you are not accepted as an exhibitor, your check will be returned – if your application is accepted there are no booth fee refunds if you decide not to participate.)

Authorized Signature of Organization

Date

By typing in your name, you agree to the Terms and Conditions of SCWC Exhibitor/Booth Application.

FOR INTERNAL USE ONLY

Confirmed to participate Yes No Booth number _____ Check Rec'd _____ Amt. _____

www.SoCalWomenConference.com

Exhibitors Contact: Gerry Sudduth, socalhealth.gerry@gmail.com or 626.316.0028