



# Autism Pensacola

serving families along the gulf coast

**Registration for Vendor Exhibitor  
API "Information and Resource Fair"  
Tuesday, April 20<sup>th</sup>, 6:30 – 9:00 p.m.  
Sacred Heart Hospital Conference Center**

Business: \_\_\_\_\_  
Or  
Nonprofit: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
*(Please provide full mailing address.)*

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**A 6 foot table and 2 chairs will be provided for all vendors. Anticipated attendance is 300. You must provide a tablecloth and decorate your own booth.**

**Businesses - Two ways to be involved:**

**Limited opportunity! Event Sponsor – Will receive premium placement of table and sponsorship recognition in program given to all attendees. Cost \$50.00.**

**Business participant – Will receive business listing in program. Cost \$30.00**

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Payment must be submitted at time of registration. No exceptions.  
Nonprofits are not required to pay but must still register.

\_\_\_ Check enclosed made payable to Autism Pensacola for \$30.00 for Business Participant or \$50.00 for Event Sponsor

Please send completed registration form and payment to:  
Autism Pensacola Resource Fair  
PO Box 30213  
Pensacola, FL 32503

For office use:  
Sponsor \_\_\_ Business \_\_\_ Non-profit \_\_\_ Signed agreement \_\_\_  
Date payment received \_\_\_\_\_

**Second page also required.**

**Please read and sign the following:**

A completed application is a contract to exhibit. **No refunds will be made.** Vendors may start set up at 5:00 p.m. on Tuesday, April 20<sup>th</sup>. No booths with electricity will be offered. No rights to exclusivity of product are implied or will be honored for "Information and Resource Fair." With the exception of the Sponsors, spaces will be provided on a first come, first serve basis upon receipt of registration and payment. **The Autism Pensacola, Inc. Council reserves the right to make exceptions to any and all policies established for the "Information and Resource Fair".**

I will abide by the rules set forth, furthermore, I hereby release and forever discharge from liability the Autism Pensacola Information and Resource Fair 2010, Autism Pensacola, Inc., Sacred Heart Health Systems, event committee, its sponsors and their affiliated companies, officers, agents, and employees.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business or Agency \_\_\_\_\_

Date Form Received in the API Office: \_\_\_\_\_ .