



EXHIBITOR/VENDOR APPLICATION FORM

Deadline: April 30, 2011

12th Annual National African American Breast Cancer Conference May 12-15, 2011

Exhibit Days: Friday, May 13 - Saturday, May 14, 2011
Crowne Plaza Hotel Baton Rouge, Louisiana

Sisters Network® Inc. is pleased to invite **your organization/company** as exhibitor or vendor to participate in the **12th Annual National African American Breast Cancer Conference**, the only national annual conference dedicated to the unique needs of African American women with breast cancer. Exhibitors are an integral and exciting part of our conference program. Participants look forward to visiting with exhibitors/vendors and learning more about available resources and products. To join us for the conference, please return the enclosed exhibitor application today!

EXHIBITOR LEVEL OPTIONS & BENEFITS

Non-sponsoring businesses and organizations have the following exhibitor options:

	<u>Table Top</u>	<u>Booth</u>
• Exhibit Level 1 (applicable to non-profit organizations):	\$ 350	\$1,000
• Exhibit Level 2 (applicable to individual businesses/retail):	\$ 500	\$1,500
• Exhibit Level 3 (applicable to corporations):	\$2,500	\$3,500

Your Exhibitor commitment includes the following benefits: complimentary continental breakfast; exhibit space in a highly visible location at the event and access to over 600 attendees affected by breast cancer as survivors, caregivers, healthcare professionals and the general public.

Vendor and exhibitor opportunities include:

- Tabletop exhibit of one six foot skirted table, one chair and a trash can
- Booths
 - Consist of polished aluminum framework and bases
 - Backgrounds will be eight-foot high back drapery with two 36” high side drapery dividers
 - Booths are furnished with one (1) skirted 6’ table, two (2) chairs, one (1) trash can and one 40”x6” identification sign

Tabletop displays are permitted. All display materials must fit on the table and not extend into surrounding areas. *****Internet and/or electrical needs are the responsibility of each exhibitor and need to be arranged separately with site location. Electrical is \$25.00 per tax & gratuity as a one-time fee. You will receive a VENDOR PACKET from the Crowne Plaza Hotel 3-4 weeks prior to the conference with instructions.***

EXHIBITOR HOURS OF OPERATION (Cypress I & II)

- Friday, May 13, 2011: Open Exhibit Hours 7:00 am - 7:00 pm
- Saturday, May 14, 2011: Open Exhibit Hours 7:00 am-6:00 pm

Please be sure your table is staffed during all open exhibit hours.

DEADLINE

Application deadline: April 30, 2011 Sisters Network® Inc., reserves the right to approve exhibitors. We will review all applications and contact all vendors and organizations to confirm participation as soon as possible after applications are received. Please be aware that exhibitor space is limited so exhibitor applications are accepted and reviewed on a first come, first served basis.

SHIPPING

You will receive a VENDOR PACKET from the Crowne Plaza Hotel 3-4 weeks prior to the conference with instructions of shipment.

*****Sisters Network® Inc. is not responsible for damage or loss of exhibit property.***

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PLEASE PRINT

(Please circle one.)

EXHIBIT OPPORTUNITIES	Tabletop	Booth
▪ Exhibit Level 1 (applicable to non-profit organizations):	\$350	\$1,000
▪ Exhibit Level 2 (applicable to individual businesses/retail):	\$500	\$1,500
▪ Exhibit Level 3 (applicable to corporations):	\$2500	\$3,500

Names of Representatives (please provide the name, email & contact/mobile phone number of attending representatives):

Name 1:			
Email address:		Contact Phone:	

Name 2:			
Email address:		Contact Phone:	

Organization/Vendor Contact Information:

Contact Name/Title:			
Organization Name:			
Street Address:			
City, State Zip:			
Phone:		Fax:	
Email:		Website:	

Payment Information:

Check enclosed payable to Sisters Network[®] Inc. Check or credit card total amount: \$_____

Credit Card (please circle): VISA / MasterCard / American Express

Credit Card #:		Exp. Date:	
Name on Card:		Security Code	
Billing Address: C/S/Z			
Email Address			

(Please Print) Description of services, information or products to be displayed or sold (50 words or less)

Signature: _____ Date: _____

For more information, call Sisters Network[®] Inc. National Headquarters

1-866-781-1808 or email events@sistersnetworkinc.org

Send this form with payment to:

Sisters Network[®] Inc. ▪ 2922 Rosedale St. ▪ Houston, TX 77004 or fax to 713-780-8998

EXHIBITOR/VENDOR Lay-Out

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