



VENDOR REGISTRATION/SUPPORT FORM
EARLY YEARS CONFERENCE
NOVEMBER 13 AND 14, 2012
BOISE STATE UNIVERSITY

Name/Contact Person: _____

Organization/Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ Website (if applicable): _____

Your fee will cover:

- One six-foot table
- Power outlet or cord (if requested- see below)
- One buffet lunch on November 14th (additional lunches may be purchased) and breakfast both mornings.
- As a vendor, you may give away, demonstrate, and take orders for future delivery at the conference; however due to BSU contractual restrictions, items cannot be sold during the conference.

Please complete the following for a reservation:

Electricity needed: YES___ NO___

There will be a demonstration: YES___ NO___

There will be membership recruitment: YES___ NO___

I will sponsor refreshments: YES___ NO___

I will provide a door prize: YES___ NO___

Vendor Table(s) ___@ \$200 for Profit or \$100 nonprofit/gov't = _____

Additional Lunches ___@ \$15 = _____

Refreshment Sponsorship \$ _____

Other Sponsorship \$ _____

Total Amount Enclosed \$ _____

Payment Method: Check:___ Money Order:___ PCA:___ (IDHW Only)

*Credit cards cannot be accepted

****To hold your reservation the fee must accompany this form. ****

Make checks payable to "Early Years" and mail by --DEADLINE--October 19, 2012 to:

**Idaho Department of Health and Welfare
Attn: Gretchan Heller, Early Years Committee
450 W State Street, 5th Floor
Boise, Idaho 83702**

If you have any questions, please contact:
Gretchan Heller at hellerg@dhw.idaho.gov or 208.334.6955.
www.earlychildhood.dhw.idaho.gov