



## Exhibitor Registration Form

Saturday, September 10, 2011

8am – 12:00pm

Washington Square Park, Pershing and Grand  
Kansas City, Missouri

Company/Organization: \_\_\_\_\_

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Payment: \$75.00 per table Method of Payment; Check- Mail, with form, to: First Call, 633 E. 63<sup>rd</sup> St., Kansas City, MO 64110

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

Name on Card: \_\_\_\_\_ Billing Address: \_\_\_\_\_

### YES! We agree to be an EXHIBITOR/RESOURCE TABLE at the 2011 Walk for Recovery:

1. Please list the type of information and/or services you will provide at your resource table:

\_\_\_\_\_

2. FAIR SET UP – 1 table (2' x 6') and 1 chair 1 additional chair requested  yes

*We are unable to provide extension cords, surge protectors, TV equip., etc.*

3. Number of staff at your table during the event: \_\_\_\_\_ Number of lunches requested: \_\_\_\_\_ (max. 2)

### FOR YOUR INFORMATION:

1. Please return this form via email or mail before August 27th

2. Set up time: Saturday Sept. 18th from 8:00-9:00am

3. Exhibitors may dismantle and leave at 12pm (*enjoy your afternoon!*)

4. QUESTIONS? Call Michelle at 816-361-1455 x108 OR email [michellei@ncaddkc.org](mailto:michellei@ncaddkc.org)

Please complete this form and mail to:

First Call, NCADD) 633 E. 63<sup>rd</sup> St., Kansas City, MO 64110

or email [michellei@ncaddkc.org](mailto:michellei@ncaddkc.org)

**Thank you!**