



WEASSP, Inc.

2009 P-5/Title I/Pre-College Sharing Conference

www.weassp.org

December 2-4, 2009

Grand Geneva Resort and Spa, Lake Geneva, Wisconsin

EXHIBITOR REGISTRATION FORM – PRIVATE VENDOR

We plan to participate in the 2009 WEASSP conference at the Grand Geneva Resort & Spa.

REGISTRANT NAME: _____ DATE: _____

TITLE: _____

EMAIL: _____

INSTITUTION/COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

of Tables to Reserve: _____ **The private vendor fee is \$300 per table.**

Check any that apply:

We will provide a door prize (please specify: _____)

We have the following a/v needs: _____
(You will be billed for any a/v equipment supplied by the Grand Geneva Resort & Spa.)

We will exhibit on: Thursday, DEC 3rd
 Friday, DEC 4th

If you plan to attend the conference sessions, you MUST register as a conference attendee separately and pay the required conference fee.

Acceptable forms of payment: Check, money order, or Agency/Institution Purchase Order made payable to **WEASSP**.
Mail your completed Exhibitor Registration Form and payment to:

WEASSP
Attn: Erica Laughlin
P.O. Box 640
Milwaukee, WI 53201
Fax 608-265-6453

REGISTRATION DEADLINE: NOVEMBER 20, 2009

Questions may be directed to Erica M. Laughlin, Exhibit Coordinator, at 608-265-2408 or exhibit@weassp.org.

WEASSP is a charitable non-profit organization exempt from taxes under Section 501(c)3 of the Internal Revenue Code.