DEAF FEST '17 **Exhibitor Reservation Form** *DEAF FEST '17*

NAME / COMPANY:				
Person in Charge of the Exhibit:				
ADDRESS:				
CITY:		STATE:		ZIP:
PHONE: ( ) -	Check one:	VP: ❑	VOICE: ❑	BOTH: ❑
EMAIL:				

NO REFUNDS!! **REGISTRATION DEADLINES** **NO REFUNDS!!**

EARLY BIRD: June 30, 2017 **DUE BY: August 31, 2017** **CLOSING DATE: September 10, 2017**

Selling or advertising for your business purpose or Fundraising purposes	✪ Early Bird:	Before June 30, 2017	**$ 100.00**	**$**
	✪ Due by:	August 31, 2017	**$ 125.00**	
	✪ Past Postmark Deadline:	After August 31, 2017	**$ 150.00**	
Providing information for an agency or organization			**$ 50.00**	**$**
No sharing of tables is allowed.				
An Additional table is $ 40 each	**No. of tables:**		**@ $ 40.00**	**$**
Electricity needed			**$ 40.00**	**$**
Township Permit Fee (*** Required ***)			***automatically added:***	**$ 25.00**
Tax Deductible Donation				**$**
			FINAL AMOUNT:	**$**

Please use MONEY ORDER or CERTIFIED CHECK to NJ DAW, Inc. (* NO PERSONAL CHECKS ACCEPTED ***)**
To use Pay Pal – go on www.njdaw.org/exhibits and pay the fee on-line.

Tent Areas: We will do our best to accommodate you inside the tent, based on first come; first serve. Please check one:

❑ Must have tent ❑ Prefer tent ❑ Prefer open air

Please provide a brief description of your exhibit (include what you plan to sell)	**Products** ❑	**No food and drinks allowed**
Signature ***(Your signature assures us that the above information is correct):***		

PLEASE RETURN THIS FORM TO THE ADDRESS BELOW TO THE ATTENTION OF "EXHIBITOR RESERVATIONS"

Silvia M. Coelho-Yi
c/o NJ DAW, Inc.
P.O. Box 6922
Piscataway, NJ 08855
Email: silviacyi@yahoo.com
www.njdaw.org