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**2016 Georgia Head Start Association
Celebrating over 50 years
Spring Training Conference**

Theme: (Head Start - Today's Vision; Tomorrow's Reality!)

May 11-13, 2016
Epworth-by-the-Sea, St. Simons, Georgia

Exhibit Table Registration Form

To reserve exhibit space, complete this form, include a check for the full amount made payable to: Georgia Head Start Association, 815 Park North Boulevard, Clarkston, GA 30021. **Registrations received without payment will not secure a reservation.**

Company/Exhibitor:

Contact person:

-

Address:

City: _____ State: _____

Zip: _____

Telephone: _____ Fax: _____

Email _____

Website address:

Products and services to be
displayed: _____

Space will be assigned on a first-come, first-served basis. Please reference the attached exhibit hall floor plan and indicate 1st, 2nd & 3rd choices.

Tabletop Booth Selection (\$325): (\$225-if company exhibits and presents a workshop)

First Choice

Second Choice

Third

workshop)

First Choice _____ Second Choice _____ Third
Choice _____

The following person* will be staffing the exhibit space.

*One conference registration will be awarded for each exhibit tabletop reserved.

I would like to register additional staff for the conference in the amount
of \$80.00 per person.

Name: _____

Name: _____

Tabletop Booth _____ x \$325 each =

Table Booth plus workshop _____ x \$225 each =

Additional Tabletops _____ x \$150 each
= _____

Number of Additional Staff _____ x \$ 80 each =

TOTAL AMOUNT SUBMITTED: \$ _____

(Please make check payable to Georgia Head Start Association)

Brief company description as you would like it to appear in the Directory of
Exhibitors.

* Exhibitors are also asked to provide a door prize for
drawings.

Please return form with payment to:
Georgia Head Start Association
815 Park North Boulevard

Registration and payment
must be received no later

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