



19th ANNUAL Chicagoland Autism Connection

“SPRING FLING FOR AUTISM AWARENESS” RESOURCE FAIR

EXHIBITOR REGISTRATION FORM

SATURDAY, APRIL 14, 2018

BOGAN TECHNICAL HIGH SCHOOL, 3939 W. 79th Street (79th Pulaski), Chicago, IL. 60652

9:00 a.m. - 12:00 Noon (Exhibitor set-up begins at 8:15 a.m.)

Dear Exhibitors,

Thank you for your interest in our 2018 “Spring Fling for Autism Awareness” Resource Fair. We are excited to bring this FREE event to families in the community that support our core mission goals: ADVOCACY, AWARENESS, EDUCATION & SUPPORT. Your support and participation help make our event a huge success! Exhibit tables are available for organizations that support and provide services to the Autism and/or intellectual/disability Community.

Exhibit space includes one round table and a basic table cover in the cafeteria area. Non-profit organizations **who do not** charge fees receive a table for **\$25**. For all other exhibitors, the cost is **\$100**.

Some six foot tables will be available with two chairs. Tables are available on a first come, first serve basis. Electricity is not available. We are expecting approximately 150 participants so please bring enough material. Unfortunately, we do not have access to copy machines.

- Would you like to sponsor our breakfast for \$300? – Funds will support coffee and continental breakfast.
 - Would you like to be listed as a sponsor for \$200? – Funds will support materials and equipment for event.
 - Would you like to be a raffle sponsor for \$100? – Funds will support our raffle prizes and gifts.
- Sponsors receive name recognition in our program, on our website and on signage throughout the event.

If your organization is interested, fill out the bottom portion of this form and send it via paypal on our website at www.chicagoautism.org or by email to: kevans@chicagoautism.org or mail by April 1st to: Chicagoland Autism Connection, 9449 S. Kedzie, #268, Evergreen Park, IL. 60805. **Questions? Email: kevans@chicagoautism.org or call 773-329-0375.**

Contact Name: _____ Organization: _____

Address: _____ Phone: _____

City, State, Zip: _____ Email: _____

Please list up to 2 additional attendees on this form:

Credit Card# _____ Visa Master Card Other

Expiration Date: _____ Security Code _____

- I am a Non- profit organization - \$25
- I am a For Profit Organization - \$100

Total Amount Enclosed: \$ _____

****Please feel free to share that you will be exhibiting at our event on your website, FACEBOOK, Instagram or other social media platforms. We want to reach as many families as possible. Thank you in Advance and we look forward to working with you at our event.***