

VIRGINIA ALLIANCE OF PARALEGAL ASSOCIATIONS
Eleventh Biennial Statewide Paralegal Conference – October 5, 2018
APPLICATION FOR EXHIBITOR SPACE AND CONFERENCE SPONSORSHIP

Priority of your application will be assigned on the basis of postmark. All applications must be made on this form. Requests for space will be considered only after a signed application has been received and accompanied with the selected exhibit fee. No refunds if canceled after September 15, 2018.

Complete this application and forward, along with your payment **payable to “VAPA”**, and send to **Kathryn Ingram, RP, c/o PANV, PO Box 222421, Chantilly, VA 20153.**

EXHIBITOR LEVEL

_____ **Exhibition Space - \$150** – Skirted table with 2 chairs provided for your organization’s attendees; electrical access (Internet access available for an additional fee); a list of conference attendees with organization affiliations; your business name on all conference signage and printed materials with your organization’s logo (if you request), and recognition on the VAPA website with a link to your organization’s webpage.

_____ **Material Display and Distribution - \$75** - printed materials, i.e. business cards, brochures, and leaflets, to be displayed on a skirted table and distributed to all seminar participants. Your business name will be included on all conference signage and printed materials with your organization’s logo (if you request), and recognition on the VAPA website with a link to your organization’s webpage.

_____ **Goodie Bag/Material and Distribution - \$50** - your goodie bags or goodie bag materials to be distributed to all seminar attendees. Your business name will be included on all conference signage and printed materials with your organization’s logo (if you request), and recognition on the VAPA website with a link to your organization’s webpage.

CONFERENCE SPONSORSHIP

_____ **Conference Sponsorship - \$200** - All Conference Sponsors names will be printed on all conference signage and printed materials with your company logo (if you request), and recognition on the VAPA website with a link to your company webpage. Your contribution will go towards the Reception celebrating Paralegals’ Week on Friday, October 5.

Company _____

Address _____

City _____ State _____ Zip _____

Telephone No. (_____) _____ Facsimile No. (_____) _____

Yes, I/we are planning to stay overnight at the Marriott on _____ (must make your own reserv.)

Signature _____ Title _____

Print above signature: _____

Exact dimensions of exhibit (if tabletop, please indicate): _____

Name of individual(s) who will staff exhibit area for whom name badges are needed: _____

Please indicate your requirements for electrical hook-ups, internet access, telephone connections, or other special needs. This information will be sent to the hotel, with whom you will deal with directly:
