



Health & Wellness Market – Vendor Application

Company Name _____

Contact Name _____

City _____ State _____ Zip _____

Contact E-Mail _____

Is your organization a registered Not for Profit? Yes / No _____

Each exhibitor is furnished with a 10 x 10 space (No covering or table) – \$100 Donation or In-Kind Donation

Number of tables requested at \$20 each _____

Checks Payable to the **Chromosome 18 Registry & Research Society**

ADDRESS: UT Health – San Antonio, 7431 Merton Minter, San Antonio, TX, 78229

Entrance through Security gates and follow signs to Event.

Set up time will be between 7.00 AM and 7.30 AM and participants will be arriving from 7.30 AM onwards.

Breakdown will be approx. 11.35 AM. **Event day contact will be Neale Parker at 210 284 2500**

Please Note:

You are allowed to bring a pop up tent as long as it's no bigger than 10 x 10 and you will have to bring substantial weights to ensure this is safely secured. As this event is on blacktop, no pegs or pins allowed.

No Electricity is available – You can bring your own generator as long as it is at least 25 feet behind the table.

Service

Please advise what you will be offering to the attendees with a brief description of that service / product.

→ Other: _____

Raffle Prize

_____ Yes, I can contribute a raffle prize. (Please notify before event)

Due to this being held outside, no refunds will be allowed in the event of a cancellation because of bad weather.

Payment is required before the day of the Event to be able to participate.

DEADLINE TO RETURN APPLICATION – April 18, 2018

Please return the completed application E-Mail your application to: Calasia Haynes at community@chromosome18.org

Once we receive your application we will E-Mail a confirmation notice that we received your application. If you do not receive a confirmation from us, please call 210-657-4968.