

The Daily Gazette Job Fair Exhibitor Registration Form

**February 13th, 2025
11:00AM - 3:00PM
Schenectady County
Public Library,
Main Branch
99 Clinton St.**

Exhibitor Name _____ Gazette Sales Rep _____ Contact _____

City _____ State _____ Zip _____
Phone _____ Cell _____
E-mail _____ Website _____
Description of your company: _____

Check the event(s) you are interested in:

☐ **\$595 Job Fair, February 13th 11:00AM - 3:00PM** _____ **Total Due**

Payment in full due by Job Fair. Cancellation of contract must be received in writing no later than 2 weeks before the event. If you have to cancel due to illness ONLY, your registration will be transferred to the next Job Fair held.

Credit Card Information: ☐ MasterCard ☐ Visa ☐ Discover ☐ AMEX

Credit Card Number _____
Back Code _____ Expiration Date _____
Name on Credit Card _____
Billing Address _____
Amount to be processed: ☐ Full Amount \$ _____ ☐ Other Amount \$ _____

Check Enclosed _____ Payable to: The Daily Gazette, mail to- Attention: Recruitment, 2345 Maxon Rd Extn, Schenectady, NY 12301

Booth includes: one table and two chairs. Exhibitor set-up, load in & pertinent details will be communicated as each event gets close
All vendors must be completely set up 30 mins before the opening of the event and stay for the full time.

Authorized Signature _____ **Date** _____

Ref: AJF

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