



CARRIER SEKANI FAMILY SERVICES

EXHIBITOR REGISTRATION FORM
“OUR WAY” INDIGENOUS HEALTH & WELLNESS CONFERENCE
PRINCE GEORGE, BC JULY 14-16, 2015

| | | | |
|--|--|------------------|--------------------|
| Company Name | | Website | |
| Address | | | |
| City/Town | | Province | Postal Code |
| Contact Phone # | | Fax # | |
| Contact Name | | | |
| Email | | | |
| Display Booth Information: (Note you are responsible for any insurance requirements.) Booths will be reserved in order of payment. Booths include one 6' table and two chairs (if power, internet or additional material is required please make prior arrangements with the Conference Coordinator). | | | |
| Booth Worker Information (Required for Badge) | | | |
| Name | | City | |
| Name | | City | |
| Each Exhibitor Space Include: | | | |
| <ul style="list-style-type: none"> • 8ft by 8ft space • One 6ft by 2ft table • Two Chairs • Conference meals | | | |
| Corporate Exhibitor Cost: | | \$100.00 per day | |
| Check all that apply | | July 14 | July 15 July 16 |
| Total Cost: | | | |
| First Nations Artisans/Non-Profit Cost: | | \$50.00 per day | |
| Check all that apply | | July 14 | July 15 July 16 |
| Total Cost: | | | |

250.562.3591 1.800.889.6855 www.csfs.org

FOR MORE INFORMATION CONTACT LISA DASILVA: lisa@csfs.org