

# Exhibitor Agreement 2010

## Oregon Art Education Association

OAEA Fall Conference – October 8th 2010

*Portland Art Museum, 1219 SW Park Avenue, Portland, Oregon 97205*

### Please fill form out completely

Exhibitor/Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Exhibitor/Company Address: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

What are your needs for the conference? (For example do you need electricity?)

\_\_\_\_\_

How many tables will you need?

\_\_\_\_\_

Can you provide product for the door prizes? If so what can you provide?

*(Note: This is really encouraged as participants are more likely to purchase products they have had a chance to use.)*

\_\_\_\_\_

Would you be willing to host a workshop at the conference? \_\_\_\_\_

If so please fill out the presenter form as well.

Can you do a vendor demo at your table that participants could sign up to see and then maybe do themselves? \_\_\_\_\_

FEE \$125 per table.

*Please note that the second day of the conference will be devoted to full day workshops. You are welcome to stay for both days, or you may choose to come for Friday only. The price is the same either way.*

AMOUNT ENCLOSED: \$ \_\_\_\_\_ CHECK# \_\_\_\_\_ PAID on \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail this Agreement & Check, payable to **Oregon Art Education Association**

Mail to: Ken Bischoff OAEA 2010 Conference,  
1138 SW Kiley Way Apt.126, Beaverton, OR 97006

*For More Info - E-mail: kbischoff76@gmail.com*