



EXHIBITOR INFORMATION SHEET

International Mentoring Association
March 17-19, 2010
Orlando, Florida

Name of Organization _____

Mailing Address _____
city state zip

Daytime Phone (_____) _____ Fax (_____) _____

Contact Person _____
(Individual responsible for setting up and monitoring your exhibit)

E-Mail Address _____

Description of Exhibit _____

Please indicate your needs:

- Electrical outlet
 Additional Table (as space allows)
 Extra chairs: _____ (#)
- Other Needs (Please be specific)

Options and Payment Information:

Exhibit fee: \$200 for the first table \$100 for each additional table \$ _____

Materials for participants: \$75 I would be interested in providing materials for inclusion in folders: \$ _____

Program Book Advertisement: Black & white only (Page size is 8.5" x 11") \$ _____
 Business Card Size \$50 4 x 5 \$250 1/2 page \$500 Full page \$750

Please include me in conference meals: \$75 (Includes two continental breakfasts, Lunch on Thur, and President's Reception Thursday Evening) \$ _____

Enclosed is my check or money order, payable to Western Michigan University in the amount of \$ _____
Please charge my Visa MasterCard Discover

Account Number _____ Exp. Date _____

Signature _____

I have read, understand and will comply with the International Mentoring Association Exhibitor Guidelines.

Date Signature of Exhibitor/Representative

Return to: International Mentoring Association
Lifelong Learning & Education
Western Michigan University
1275 Ellsworth Hall
Kalamazoo, Michigan, 49008-5280
Phone: 269.387.4174 • Fax: 269.387.4189