

City of Daphne's 5th Annual Employee Benefits and Wellness Fair
"FITNESS SCORECARD!"

July 25, 2007 11:00 a.m. to 3:00 p.m.
Daphne Civic Center, Daphne, Alabama

VENDOR CONFIRMATION FORM

Contact Person: _____ Title: _____

Organization: _____

Address: _____

City/State/Zip: _____

Daytime Phone#: _____ Fax: _____

The following person has been selected to attend the conference and "man the booth."

Name: _____ Title: _____

Daytime Phone#: _____ Fax: _____

Submittal of this form confirms my organization's commitment to the following:

1) **Exhibit space for Benefits and Wellness Fair - \$25**
Fee covers one complete registration package along with refreshments.

2) **Additional Sponsorship Options:**

___ 1) Bronze \$25

___ 2) Silver \$50

___ 3) Gold \$75

___ 4) Platinum \$100

3) My organization plans to give a door prize during the program ___ Yes ___ No

4) My organization plans to give a short 15 minute demonstration and/or presentation during the Fair* ___ Yes ___ No

If yes, please describe the content of your presentation below: _____

*This opportunity is limited to the first 10 vendors who respond

Method of Payment:

I am enclosing a check in the total amount of \$_____ (Registration fee of \$25 plus additional sponsorship fees.)

Please make checks payable to: City of Daphne

Mail your check and this form to: City of Daphne
Attn: Vickie Hinman, Human Resources
PO Box 400
Daphne, AL 36526

Confirmation and sponsorship fee due by July 11, 2007. Any questions please call: 251-621-3075