KENOSHA AREA CHAMBER OF COMMERCE



# **KENOSHA HEALTH FAIR**

MARCH 4-5, 2017, 10AM-4PM DAILY UW-PARKSIDE FRANK J. PETRETTI FIELDHOUSE

# **BUSINESS DETAILS**

state	zip
	zip
fax	
tion will be sent to	this address)
classify exhibitors	for visitors)
ds or less)	

Health care vendors must provide a free Health Screening of interactive	٧e
Service in order to be a part of this Health Fair. Please describe you	ur
service.	
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# **BOOTH PRICING STRUCTURE**

Regular Booth Pricing	
\$300	O Health Fair Booth
\$50 off each additional booth	O Additional Booths
Booth Cost	
s / Sponsorship	Addit
TOTAL	

# **EXHIBITOR BOOTH SELECTION**

Health Fair registrations will be reviewed and approved by the Health Fair Committee before acceptance to ensure that a variety of health services and screenings are represented. The criteria for selection includes vendor type, value of the screen or service provided, and number of similar vendors. Chamber Members will receive first consideration. All exhibitors will receive an 8' table and two chairs. Hanging signs are not included with your booth registration. There is limited electricity available to each booth. Booths will be assigned.

### **CONTACT INFORMATION**

Make checks out to: Kenosha Area Chamber of Commerce

Fax / email form to: (262) 654-4655 or info@kenoshaareachamber.com

Mail payment / form to: 600 52nd Street, Suite 130, Kenosha, WI 53140

### **PAYMENT**

If your business is unable to attend the 2017 Kenosha Expo, please cancel by 4:00pm on February 24, 2017. *No refunds will be given if a cancellation is made after this date.* 

exp.date
security code
,
date