



Florida American Sign Language Teachers Association

■ 2019 Annual Professional Development Conference ■

February 15th-16th, 2019

Conference & Hotel –Sheraton Suites Fort Lauderdale at Cypress Creek,
555 NW 62nd Street, Fort Lauderdale, FL 33309

"THE NEW HORIZONS"

VENDORS/EXHIBITORS

The Florida American Sign Language Teachers Association invites you to participate as a vendor / exhibitor at our 2019 Annual Conference: "THE NEW HORIZONS" to be held on February 15th to 16th. This conference will be held in Fort Lauderdale, Florida. Take advantage of the opportunity to visit the sunny palm-lined streets, scenic waterfront, quaint shopping district, historic neighborhoods amid an atmosphere of elegance and comfort, while at the same time promoting your business, corporation, or organization.

PRICE:

Flat rate of \$100 per table for Friday evening, Saturday all day/evening. Fee includes: All of the benefits of the conference for up to 2 people, one 6-foot table draped, 2 chairs, electricity and Wi-Fi (bring your own extension cord, please). Company name in "Vendors" list in the program book.

SCHEDULE:

Friday, 2/15 from 4 pm – 10 pm
Saturday, 2/16 from 8 am – 10 pm

SET-UP:

Friday, 2/15 from 3 pm. – 4 pm

All exhibits will be located in the same room and will be in a direct path between breakout rooms. Hotel policy is as follows: Nothing may be nailed, tacked, taped or otherwise attached to wall, doors, furniture or other parts of the building. Vendors/exhibitors will be held liable for any damage incurred during set-up/breakdown. Hotel staff will be available to assist in hanging signs or banners. Please indicate specific needs below as there is a limited supply of extension cords, power strips and direct internet plug-ins.

BREAKDOWN:

Saturday, 2/16 from 9pm – 10pm

INSURANCE/LIABILITY:

Vendors/exhibitors are to make arrangements for insurance coverage of the property being exhibited as neither the Hotel nor the Florida American Sign Language Teachers Association accepts responsibility for damage and/or loss of any merchandise brought onto the property.

REGISTRATION:

To reserve a booth, fill out, sign and mail the Vendor/Exhibit Contract Form with payment (payable to FASLTA) no later than January 15, 2019. **\$30 fee will be charged for returned checks** Cancellation: Should an exhibitor wish to cancel this contract, FASLTA must be notified in writing before January 15, 2019. If cancellation is before said date, \$75 will be refunded. If an exhibitor has paid but is a NO SHOW, there will be no refund.

HOTEL INFORMATION:

Reservation Method: Individual reservations can be made by calling Central Reservations at: 1-888-627-8250 or online via a Star-Link website. A Star-Link will be provided for your group for the purpose of making reservations on-line and monitor the reservations/bookings on the block. Individual callers must identify their affiliation with the "FASLTA FEB 2019". Callers will be required to provide a credit card upon confirming reservation. Guaranteed reservations within the group block that are "no shows" or cancelled less than forty-eight (48) hours prior to guest arrival, will be assessed a charge of one night's room and tax.

Rooms	Single Rate	Double Rate	Triple Rate	Quad Rate
	\$169	\$169	\$179	\$189

<https://www.starwoodmeeting.com/events/start.action?id=1807264126&key=E11BE8>

>>>>>For more information, you may email revjvega@gmail.com <<<<<<



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VENDOR/EXHIBITOR INFORMATION: (Due with payment by January 15, 2019)

Name: (Mr. /Mrs. /Ms. /Dr.) _____

Name for badge: _____

Business/Organization _____

Address _____ City _____ State _____ Zip _____

Email _____ @ _____

Home Phone (____) _____ VOICE VP TTY

Work Phone (____) _____ VOICE VP TTY

My company/organization has the following needs: (check all that apply)

- electricity extension cord power strip Wi-Fi direct internet plug-in
- hotel staff assistance with banner or other items which need to be hung

Other needs: _____

Emergency Contact Name _____ Phone _____

PAYMENT INFORMATION: (Payable to FASLTA)

Total payment: \$ _____ Check # _____

Money order/Cashier's check # _____

Sorry no credit charges accepted. However, we do accept
PayPal on the website: www.fasлта.org

Mail this form with payment to:

Cindi Jacobs, FASLTA Treasurer
4911 Pinemore Lane
Lake Worth, FL 33463-6996
(cjfasлта@aol.com)

Contact person:

Rey Vega
(reyvega@gmail.com)

By signing this contract, vendor/exhibitor agrees to abide by all terms, conditions and regulations set forth in this contract.

Exhibitor name: _____

Exhibitor signature: _____

Date: _____

DO NOT WRITE BELOW THIS LINE

Date received: _____ Date confirmation sent: _____ Email Letter