

WI-CARH'S 2014 Annual Meeting & Conference

Sponsor/Exhibitor Registration Form

Yes, I/we would like to be a SPONSOR!

Please check your level of sponsorship:

EDUCATIONAL PARTNER \$650.00

Yes, I/we need an exhibit table.

GOLD SPONSOR \$500.00

Yes, I/we need an exhibit table.

SILVER SPONSOR \$250.00

Name of 1 Complimentary Attendee and Title: *(for name badge)*

Vegetarian Meal? Yes No

Yes, I/we would like to be an EXHIBITOR for \$199.

Name of 1 Complimentary Attendee and Title: *(for name badge)*

Vegetarian Meal? Yes No

\$50 for ONE additional attendee to staff your exhibit.

Name of additional attendee and title: *(for name badge)*

Vegetarian Meal? Yes No

Total Sponsor/Exhibitor Fees

Sponsor \$_____

Exhibitor \$_____

Additional Attendee \$_____

Total Enclosed \$_____

Make check payable to WI-CARH and mail to:

**WI-CARH
P. O. Box 394
Mt. Horeb, WI 53572**

***Please Submit By:
September 30, 2014***

Cancellation Policy

**No monies will be refunded after
October 17, 2014. All cancellations must
be in writing.**

**Please check if you need either of the
following at your exhibitor table:**

Electricity Internet

Organization: _____

(Please list company name as it should appear on sign)

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Telephone: _____ E-Mail: _____ Website: _____

How would you describe your company?

Developer Manager Owner Housing Authority

Syndicator/Equity Financier Vendor/Supplier Other _____

Any questions, please contact Laura Mason at the WI-CARH office (608) 437-2300 or info@wicarh.org.