

**Farm to Table**

**FRIDAY & SATURDAY, March 27 & 28, 2015**

***David L. Lawrence Convention Center, Downtown Pittsburgh***

**Exhibit Hall Hours: Friday, March 27: 10 am – 5 pm & Saturday, March 28: 10 am – 5 pm**

**Contact Erin Hart with any questions: Phone: 412/657-3028 Email: ehart@american-healthcare.net**

|  |
| --- |
|  Pay by Check: Checks payable to: ***American Health Fairs****,* 1910 Cochran Road, Manor Oak One, 405, Pittsburgh, PA 15220 |
|  Pay with Credit:*Credit will be processed under the name* ***American HealthCare Group.*** *Your credit card bill will reflect this.*  | Credit Card Type:  |  Visa MasterCard American Express |
| Card Number:  |  | Exp Date: |  |
| Name on card: | Security Code:  |
| SIGN HERE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Contact Name: |  |
| Address: |  | City/State/Zip: |  |
| Phone#: |  | Fax#: |  | Email: |  |
| extra tables ($50 each): |  | # of chairs: |  | Electricity? Yes No($140)  |  |
| Description of Table Presentation |  |

**Registration includes:**

**- Businesses with less than $50,000 in revenue pay the discounted rate**

- 1 8 foot table

- Name in program

**Program Advertising**

**Full Page** $500

**Half Page** $275

**Quarter Page** $150

Ads should be submitted at 300 dpi with no bleed.  Acceptable file formats are .png, .jpg, or .pdf.

- Customized Exhibit space

- Name & full page ad in program

- Name and logo on website

- Recognition prior to speaker

- Inclusion in press releases

- Event Signage

- Inclusion in event promotions

- Develop customized promotions

**Speaker Sponsor**

**Cooking Demonstration Sponsor**

**Local Food Tasting Sponsor**

**Sponsorship Levels: $3,500**

**SPONSORSHIP and EXHIBITOR LEVELS**

**Payment is due when you submit this contract.** If payment has been received, and a paid exhibitor must cancel; no refund will be issued. If a vendor is late to an event without prior notice, the reserved table may or may not be available upon arrival.

**Questions?** (**412)657-3028 Fax: (412)563-8319**

**Exhibitor Fee - $600 or $300**

**BASIC INFORMATION**

Exhibitor/Sponsor Fee \_\_\_\_\_\_\_\_\_\_

Discount \_\_\_\_\_\_\_\_\_\_

(10% before 1/31/15)

Ad Fee ($275 or $500) \_\_\_\_\_\_\_\_\_\_

Electricity ($140) \_\_\_\_\_\_\_\_\_\_

Extra Tables ($50 each) \_\_\_\_\_\_\_\_\_\_

Corner Booth ($100) \_\_\_\_\_\_\_\_\_\_

**Total**  \_\_\_\_\_\_\_\_\_\_

**PAYMENT INFORMATION**