



**Healthiest Town in America  
Fall Event  
Sunday - November 6th, 2011 - 10am-2pm  
Oro Valley Hospital Parking Lot  
Tent Sponsorship Agreement Form**

**Tent w/ 6'ft table / 2 chairs  
Mention on HTA web site, link to your web site**

**\$300 - payment in advance**

Please note: limited availability, no category exclusivity.

Company Name: \_\_\_\_\_  
(As it appears on all print materials)

Type of Business: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Website Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Client Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Kathy Dunn for more information – 520.576.8031

\*By signing this contract, you agree that you and your staff will adhere to all the exhibitor rules, which are attached. You also understand that this contract does not guarantee you a place in the event until final exhibitor approval is received from venue.