

**The Healthiest Town in America
Fall Healthy Expo
Oro Valley Hospital North Parking Lot
Saturday – October 23, 2010 9am-1pm
Event Sponsorship Agreement Form**

You receive the following:

- (1) 6' table, 2 chairs under a tent if needed (based on the activity)**
- Logo will be included in all full page, full color ads in the Explorer**
- Logo on event banners**
- Logo on HTA website with link to your website**
- Mention in all email newsletters and promotional information**

Vendors are required to have a healthy activity, health assessment or demonstration that is interactive with attendees. This is not a trade show.

\$500 - payment in advance to hold position

Please note: limited availability (only ten), 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 Kathryn 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. You also understand that this contract does not guarantee you a place in the event until final exhibitor approval is received from venue.

