

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

**You are provided the following:**

**(1) 6' table & 2 chairs under a tent if needed (based on the activity)  
Logo on HTA web site with link to your web site**

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

**\$200 (paid in full at time of agreement)**

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 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.