

West Central Mosquito and Vector Control Association

2010 Vendor Registration Form

Name _____
Agency _____
Address _____
City _____ State _____ Zip _____
Phone number _____ Email _____

_____ \$125 Sustaining Membership (includes one Meeting Registration)

_____ \$150 Booth Space* (includes 2nd Meeting Registration)

***Must be Sustaining Member to purchase Booth Space**

Sponsorship Opportunities:

- _____ \$700 Wednesday Morning Break
- _____ \$700 Wednesday Afternoon Break
- _____ \$700 Thursday Morning Break
- _____ \$700 Thursday Afternoon Break
- _____ \$700 Audio/Visual & Program Brochure
- _____ \$2,500 Wednesday Breakfast
- _____ \$2,500 Wednesday Evening Social
- _____ \$2,500 Thursday Breakfast
- _____ \$3,000 Wednesday Lunch
- _____ \$3,000 Thursday Lunch

_____ Donation to [Hollandsworth Scholarship](#) Fund

Total Amount Enclosed

Yes No Permission to publish contact information on the WCMVCA Web page

Please make checks payable to West Central Mosquito and Vector Control Association (WCMVCA).

Return this registration form by Feb 10, 2010 to:

Sara Evans
Weld County Dept of Health & Environment
1555 N. 17th Ave
Greeley, CO 80631
sevans@co.weld.co.us

For vendor information, contact:

Tom Janousek
(402) 561-9260
tjmosq@msn.com