VALLEY DEAF FESTIVAL 2024 EXHIBITOR RESERVATION FORM

Company Name:				
Responsible Party and Title:				
(Please list two names of inc Participants: (1) Address:		(2)		
City:	State: _		_ Zip Code:	
Phone Number:	V/TTY/VP Fax: _		Email:	
Describe your Business: Retail sales, other than direc having a sales permit, chargi	t sales companies, are	responsible t		
Would you like to donate an	item to be used as a ra	iffle prize?	Yes (What):	No
Do you need interpreting/co	mmunication assistanc	e? Yes No		
Do you need electrical acces	s? Yes No			
Do you need wireless interneted from the Fresno Fairgrounds	•		_	ess wireless internet
Please select the booth quar Registration and Meal Fee v			November 1, 202	4):
\$115 per 8' x 10' enterprise booth (One meal service included) Registration Fee only: (before November 1, 2024)		(Qty)	\$15 for Meal Fee per person y) Additional meal service for participant(s) at the booth only)	
\$100 per 8' x 10' e	nterprise booth			
(Qty.)				
Please enclose your Reserva your donated item (optional	•			•
DHHSC Attn: Shelley Stout, VDF 202 5340 N. Fresno St. Fresno, CA 93710	4 Exhibit Committee			

The forms and payment option are now available on DHHSC's website:

Booth fees are non-refundable for cancellations made after November 1, 2024.