



Louisiana State Conference NAACP ANNUAL VENDOR REGISTRATION FORM

3313 Government Street • Baton Rouge, LA 70806

Event: **Annual Convention & Leadership Conference**

Time: **9:00 AM – 4:00 PM (set-up 8:00 AM each day)**

Requesting: **Display Table / 2 Chairs** **2 Tables** **3 Tables** **4 Tables**

Company: _____

Contact: _____

Address: _____

City/State: _____

Telephone: _____

Fax: _____

Email: _____

Signature: _____

PRICED PER TABLE: **\$125.00 Two (2) Days** **\$80.00 Saturday ONLY** **\$60.00 Friday ONLY**

PLEASE INITIAL:

_____ Each Vendor will be provided with a **table and two chairs** per table order. Vendors are asked to bring their own table covering(s) and identification sign(s).

_____ **NOTE:** The Louisiana State Conference NAACP **IS NOT RESPONSIBLE** for any of the display items, merchandise, etc. Please secure your items!

Fax your registration form to the **Convention Registrar and State Treasurer Charles Heckard** who can be reached at (318) 376-3196, email: heckardc@yahoo.com.

As always, thank you for your support of the **Louisiana State Conference NAACP!**

If you have questions or need additional information, please feel free to contact the Convention Chairman via email at levonleban@yahoo.com or by telephone at (504) 315-2776.

