

7<sup>TH</sup> ANNUAL DEAF AWARENESS DAY  
 WHITE BEAR LAKE HIGH SCHOOL  
 April 2020

**EARLY BIRD Booth Registration**

	Before September 1 <sup>st</sup> 2019	January 1st 2020	March 27 <sup>th</sup> 2020
Individual	\$25	\$35	\$50
Information	\$45	\$55	\$70
Not-for-Profit	\$70	\$85	\$100
Small Business	\$125	\$140	\$160
Large Business	\$150	\$175	\$195 (per Table)

**NO RESERVATIONS ACCEPTED AFTER April 3<sup>rd</sup>**

Schedule: Set up at 7:30 AM. Take down by 5:00 PM. Out the door by 6:00 PM.

All exhibits are indoors. If you would like a specific location and/or electrical outlet, please state that in your registration. We will try to accommodate requests as much as possible. Table coverings are the responsibility of the exhibitors. All tables are 8-foot-long with 2 chairs.

Each exhibitor is responsible for keeping the aisle or aisles near their booth free of congestion. The exhibitor is expected to return the table and facility in the same condition it was at the commencement of occupation. The exhibitor and their representatives will not be liable for injuries to any person or for damage to property owned or controlled by the exhibitor, which claims for damage or injuries which may be incident to, arise from, or be in any contract with the exhibitor's occupation of the display space, and the exhibitor, on signing the contract, expressly release and indemnifies the aforementioned from any and all claims for such loss, damage, or injury.

Concessions will be available at the facility. Selling food or beverages at booths are prohibited.

Questions—please contact: **DAD@minndeaf.org**

# Deaf Awareness Day

April 2020

White Bear Lake High School

3551 McKnight Road, White Bear Lake Mn 55110

## Booth Reservation Form

Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Nbr: \_\_\_\_\_ VP / Text / Voice (circle one)

Number of Tables: \_\_\_\_\_

Special needs/ requests: \_\_\_\_\_

(location or near outlet)

Exhibitor hereby acknowledges and understands the terms and conditions of Deaf Awareness Day.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Payment:** Please make check payable to: **MADC** with memo line: **DAD**

**Mail to:** White Bear Lake Area High School  
David Nathanson  
Attn: Deaf Awareness Day  
3551 McKnight Road  
White Bear Lake, Mn 55110