

5TH ANNUAL BLACK HILLS BRAIN INJURY CONFERENCE

May 13-14, 2010

Ramkota Hotel
Rapid City, SD 57701

Vendor Fact Sheet

PLEASE TYPE OR PRINT

Company/Organization: _____

Address: _____

City, State and Zip Code: _____

Phone Number: _____ Fax: _____

E-mail: _____

Website: _____

Contact Person: _____ Title: _____

Vendor Booth Fee - \$275.00 (please make check payable to Community Transitions)

This fee includes one registration to the conference and the conference luncheon. If addition people plan to attend the conference, please attach a separate registration form and payment.

Name and Title of the Representative(s) who will be at your booth

ADDITIONAL NEEDS

Community Transitions/Ramkota Hotel will provide an exhibition space (which includes a 6' table with linen and 2 chairs) for both May 13 - 14th.

- Yes, electrical outlet needed
- No, I don't need an electrical outlet
- Other needs; please specify: _____

EVERY EFFORT WILL BE MADE TO ACCOMMODATE YOUR REQUESTS

For Additional Information Contact:

Ron Sasso: rsasso@bhws.com at (605) 718-8446

or

Melissa Evenson: mevenson@bhws.com (605) 343-7297 (Please leave a message and your call will be returned.)

Additional information on the conference will be made available at: www.brainrehab.org under “News and Events.”

Send completed forms and payment of \$275 to:

Community Transitions
803 Soo San Drive
Rapid City, SD 57702
Fax # (605) 721-9858

******Vendor Registrations Forms must be received by April 29, 2010.**