

SC Assistive Technology Expo – March 22, 2017

Exhibit Space Reservation

Choose One:

Agency or Non-Profit

Business

Information:

Name of Entity:

Contact Person:

Phone:

Fax:

E-mail:

Website:

Street Address:

City, State, Zip:

Name Tags. Type names exactly as they are to appear on the name tags:

Describe types of products/information to be displayed:

	Booth 8x8 booth with one 8 ft. skirted table and two tickets for lunch	Extra 6 ft. Table	Electrical Outlet	Total
Agency/Non-Profit	100	35	40	
Business	300	35	40	

Comments:

Email completed form to: Tammy.Wallace@uscmed.sc.edu Thank you!