



15th Annual CARES Health & Wellness Expo
SPONSOR & PARTICIPATION FEE

<input type="checkbox"/> \$5,000 PRESENTING Sponsor	<input type="checkbox"/> 2,500 PREMIERE Sponsor	<input type="checkbox"/> \$1,000 PRIMARY Sponsor
<input type="checkbox"/> \$500 TITLE Sponsor	<input type="checkbox"/> \$200 Exhibitor Only	<input type="checkbox"/> \$150 Exhibitor - Non Profit
Business Name:		
Business Address:		
City:	State:	Zip:
Contact Person:		Phone:
Email:		
Business Type/Service Description:		
Will you require electricity? <input type="radio"/> YES <input type="radio"/> NO		
Will you require additional space for screenings? <input type="radio"/> YES <input type="radio"/> NO		
If yes, what type of screenings:		

Vendors are asked to provide their own table coverings and a door prize/gift basket with a minimum \$25.00 value.

Please make checks out to CARES Senior Health Clinic. Mail check and form to:
 CARES Senior Health Clinic | 6640 Van Buren Street | New Port Richey, FL 34653
 To pay by credit card call Pam, Lori or Gisela (see below).

FOR ADDITIONAL INFORMATION PLEASE CONTACT:

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