



Sponsor Information

Company: _____

Company Address: _____

City/State/Zip: _____

Primary Contact Name: _____ Phone: _____

Email Address: _____

VENDOR OPPORTUNITIES

OCTOBER 17, 2017 AT TD CONVENTION CENTER

- Table vendor ONLY = \$150
- Request tablecloth be provided by TD Convention Center *(no additional cost)*
- Request a St. Francis volunteer to assist me with tear down of my table at 6:30pm *(valid ONLY for tear down)*

Benefits include:

- (1) 8' skirted table in pre-function space of Grand Ballroom
 - o **Additional \$150 per table**
- Exposure to 1,000+ ladies of your products and services with **opportunity to sell on-site**

Dinner Ticket = \$25

Benefits include:

- 1 dinner ticket with reserved seating in the vendor section of ballroom. NOTE: Public ticket price is \$50.
 - o **Extra individual tickets of \$25 must be purchased for additional vendor representatives to attend dinner**

PAYMENT OPTIONS

- Enclosed is a check for my vendor table.
- Yes, we will be a vendor. Please invoice us by ____/____/2017 *(to be paid by 8/31/2017)*.

Signature (required) _____

date _____

Please mail/fax completed form to:
St. Francis Foundation, One St. Francis Drive, Greenville, SC 29601
(864) 679-8879 fax
Contact Karri Westmoreland at (864) 255-1257 or karri_westmoreland@bshsi.org.

