

2018

October 4

EXHIBITOR FORM

# 13<sup>th</sup> Annual Indiana Latino Conference

Marriott Hotel - Downtown Indianapolis

### Organization Info

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

Contact Person: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### Special Needs

# Electrical outlets \_\_\_\_\_ (\$30.00 each)

Other \_\_\_\_\_

### Fees

Not for profit..... \$150.00

All other.....\$250.00

Electrical outlets (each)..... \$ 30.00

Total Payment \$ \_\_\_\_\_ .00

\*\*\* Exhibitor fees include: luncheon admittance (1) | 6ft. table (1) | chair (1) |

Checks payable to the order of:  
Latino Coalition Against Domestic & Sexual Violence  
300 E. Fall Creek Parkway N Drive, Suite 200  
Indianapolis, IN 46205  
Tel.: (317) 926-4673  
Fax: (317) 926-4672

Overnight Accommodations:  
Marriott Hotel, Downtown Indianapolis  
Call (317) 822-3500

“Making Technology Work for Victims”