



Idaho Association of School Business Officials

Robert Seaman, Co-Chairman
 Twin Falls School District No. 411
 201 Main Avenue West
 Twin Falls, ID 83301
 (208) 733-6900 Fax (208)733-8474
 E-mail: seamanro@tfsd.k12.id.us

Pam Wade, Co-Chairman
 Cassia County School District No. 151
 237 East 19th Street
 Burley, ID 83318
 (208) 878-6600 Fax (208) 878-4231
 E-mail: wadpam@sd151k12.id.us

IASBO VENDOR EXHIBIT CONTRACT

SPONSORSHIPS are a great way to gain extra exposure for your business. Your sponsorship will be listed in the conference program and a sign will be provided at the session. Please indicate the appropriate activities you wish to sponsor by listing the event and amount. The amounts listed represent co-sponsorship; if you would like an exclusive for an event, contact the vendor chairman.

Thank you for your additional support.

_____ Thursday Continental Breakfast (\$150 - \$300)	\$ _____	_____ Thursday Luncheon	\$ _____
_____ Thursday Mid-morning Break (\$100 - \$200)	\$ _____	_____ Friday Luncheon	\$ _____
_____ Thursday Afternoon Break (\$100 - \$200)	\$ _____	_____ Thursday President's	
_____ Friday Continental Breakfast (\$150 - \$300)	\$ _____	Reception (Banquet)	\$ _____
_____ Friday Mid-morning Break (\$100 - \$200)	\$ _____	_____ Other _____	\$ _____

Registration: The registration fee includes one (1) 8'x 8' booth and lunch for one representative for each day. If you wish to have additional lunches, more than one booth, a table or chairs, please indicate below. Check-in will be between 6:00 p.m. and 7:30 p.m. on Wednesday, June 24, 2009 at the *Double Tree - Riverside* with check-out by 11:00 a.m. Friday, June 26, 2009.

NAME _____ TITLE _____
 COMPANY _____
 ADDRESS _____
 PHONE _____ FAX _____

Number of booths needed _____ @ \$250.00 = \$ _____
 Will you need a table? Yes _____ No _____ Number of Chairs _____ (no charge)
 Will you need electrical service? Yes _____ No _____
 Additional representatives lunches Thursday _____ @ \$15.00 per representative = \$ _____
 Additional representatives lunches Friday _____ @ \$15.00 per representative = \$ _____
 (One lunch each day is provided with registration)
 Thursday evening banquet meal _____ @ \$27.00 per meal = \$ _____
 Total Sponsorships = \$ _____

Grand Total Fees Enclosed \$ _____

List names for badge(s): _____

E-Mail Address _____

Please **return** registration form and check by **May 1, 2009**.

Please make checks payable to **IASBO** and send to:

Idaho Association of School Business Officials
Pam Wade, Vendor Co-Chairman
 237 East 19th Street
 Burley, ID 83318