



THE MATTHEW REARDON CENTER
AUTISM
CONFERENCE

February 28th-March 1st, 2019

International Trade & Convention Center
1 International Dr.
Savannah, GA 31421

2019 Conference Exhibitors

Application:

Please complete this form and return to eroma@matthewreardon.org

- Non-profit Rate
 - \$350
 - 1 Complimentary Conference Ticket

- For Profit Rate
 - \$600
 - 1 Complimentary Conference Ticket

→ Tables will have a skirted table cloth,
2 chairs, and a small waste basket

Company Name:
Contact Person:
Name of Person at Exhibitor Table:
Mailing Address:

Phone:
Email:

Credit Card Information

- Visa
- Mastercard
- Other _____

Credit card number:
Credit card expiration date:
Credit card CVV number:
Name on Card:

Matthew Reardon Center for Autism
is authorized to charge:
\$ _____

Signature

- By completing and submitting this form you are indicating that The Matthew Reardon Center for Autism has permission to bill the listed credit card for the amount indicated.

Application is subject to approval. Matthew Reardon Center for Autism will use discretion in choosing exhibitors that focus on services and supports for individuals with autism. If you have questions, please contact Erin Roma at eroma@matthewreardon.org or Faye Montgomery at fmontgomery@matthewreardon.org.