



2024 Vendor Form

Famous Family Bistro Conference & Disability Resources Expo

Saturday, April 20th
9:00 AM – 3:00 PM

Contact Information

Contact information should reflect the primary contact for the vendor who can coordinate with the conference planning team and must be available to contact on day of conference in case of an emergency or need.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Website: _____

Primary Contact Name/Title: _____

Primary Contact Phone #: _____

Primary Contact Email: _____

TYPE OF BUSINESS

Please briefly describe the products and/or services to be showcased as a vendor:

Vendor Booth - \$125

Booth space will include one 6' x 1' table with an approximate booth size of 8' x 6'. Booth space is limited, so please submit your forms as soon as you are able too.

DOOR PRIZE DONATION

Would you like to donate a door prize? ☐ Yes ☐ No

If yes, please list description of door prize: _____

If yes, please list description of door prize: _____

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The PAC will promote that your organization will be an exhibitor at our conference on social media. (i.e., Facebook, LinkedIn, etc.) Please include your company logo with your vendor form submission.

Make Check Payable To:
Parent Advisory Council, Inc.
PO Box 173
Greenbrier, AR 72058

If you need to be invoiced, please contact us at CMSPAC90@YAHOO.COM.

Deadline to submit is March 31, 2024