Vendor Contract Form Beyond the Scope 2024 Sponsored by Connecticut SGNA

Thank you for your participation in the CTSGNA Annual Fall Seminar "Beyond the Scope 2024" September 21st, 2024

DoubleTree by Hilton 42 Century Dr. Bristol, CT 06010 (860) 589-7766

Company:	
Address:	
City, State, Zip:	
Telephone / Fax:	
E-Mail Address:	
Name of Contact Person:	
Signature:	Date:

Please make checks payable to: CTSGNA

Please include the business card of the representative / contact person.

The exhibitor fee is \$500. Applications should be submitted by August 15th, 2024 A table will not be reserved for you until this fee has been received.

The submission of this form binds the applicant to the aforementioned fees. To pay by PayPal go to our website CTSGNA.org click Beyond the Scope, see Vendor Information.

Return this form and remittance to:

Janet Cordova BSN, RN, CGRN 5 Rosa Lane Shelton, CT 06484 (203) 520-0238 janetcordova@sbcglobal.net