



Correctional Education Association
Region 1 – New York
Vendor/Exhibitor Registration Form

Name _____ Title _____

Company/Institution _____ Phone Number _____

Address _____ City _____ ST _____ ZIP _____

CEA Member? _____ Membership Number _____

Representative Attending _____ Phone Number _____

(Place check mark for tables) Wednesday, 1st _____; Thursday, 2nd _____; Friday, 3rd AM _____

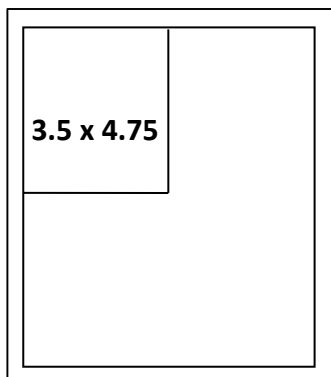
One Table all 3 days: \$450 _____ or \$400 Only Thursday _____; Additional Table \$200 ea. _____ Total \$ _____

Additional Meal Costs: *Teacher of the Year Luncheon on Thursday included for one representative.*

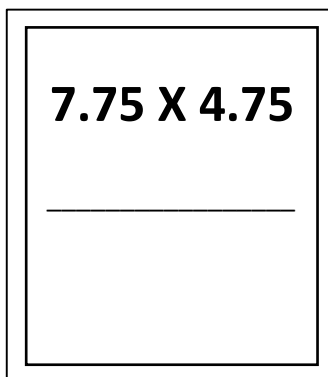
Lunch- Wednesday, June 1st @ \$20.00; Breakfast- Friday, June 3rd @ \$20.00 Total \$ _____

Will you need an electrical outlet? _____

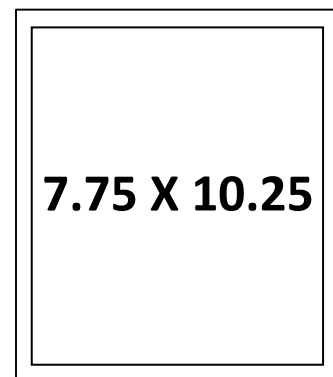
Fees for advertising space in the Conference Guide:



Quarter –page ad \$100. _____



Half-page ad \$150. _____



Full-page ad \$250. _____ Total \$ _____

Ad copy MUST be sent to: Ronald McDonagh at: rmcdonagh@nycap.rr.com ; Questions: 518-439-7504

(Ad copy should be in .pdf, .jpeg, or .tiff formats -300 dpi) due by February 1st, 2016.

- Our company would like to make an additional commitment to this conference and become a recognized sponsor in the amount of \$ _____; or sponsor a Coffee Break \$ _____; the Ice Cream Social \$ _____; the Reception \$ _____ or other event _____.
- Our company is interested in presenting a workshop. _____ Name of Presenter/Topic _____

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- Please make Checks payable to **CEANY** and MUST be mailed by February 1, 2016 along with this form to:

 CEA 2016 Region I Conference Attn: **Kenneth Cranford** PO Box 444 Ovid, NY 14521-0444

 **55th Correctional Education Association Region I Conference - June 1-3, 2016**

At The Great Escape Lodge Lake George, New York

Catch us on CEA's website: www.CEAREGION1.org