July 1, 2012

TO: Potential Conference Exhibitors

FROM: Ryan Zens, Conference Chair

RE: 13th Annual SoDakSACA State Conference

“Laissez les Bons Temps Rouler” (Let the Good Times Roll)
   with Quality School-Age Care in 2012!

Exhibitors Invited

The 13th annual South Dakota School-Age Care Alliance (SoDakSACA) conference will be held October 5-6, 2012 at the Best Western Ramkota Hotel - Sioux Falls, South Dakota. **We invite you to participate in this exciting event!** This year’s ‘mardi gras-themed’ conference is aimed at school-age care (K-8th) program directors and staff, childcare providers, teachers, youth development workers, extension educators, etc. We anticipate 150 participants at this event.

We are planning special events to increase traffic to your booths, promote excitement & appreciation and recognition for your donated door prizes and coupons. Friendly competition and teamwork will be sure to spread the news of your booth throughout the conference.

We would like to have exhibit booths open for a minimum time frame of 12:00 pm to 6:00 pm on Friday; and 7:30 am to 3:00 pm on Saturday. You may choose to be open for longer periods of time (Friday morning), if you wish.

If you are interested in being an exhibitor, or if you wish to be part of this event by donating door prizes, **please complete the Exhibitor Registration Form enclosed**, and return it to the address listed below by **August 24, 2012**. A confirmation letter and further information on logistics will then be sent to you. If you have any questions, please contact Ryan Zens at 1-605-341-0078 or 1-605-430-2671. Thank you!

SoDakSACA
% Ryan Zens
3660 Sturgis RD St# 4
Rapid City, SD 57702
SoDakSACA Conference Exhibitor Registration Form

☐ YES! I would like to be an exhibitor at the 13th annual SoDakSACA Conference on October 5-6, 2012 at the Best Western Ramkota Hotel – Sioux Falls, SD.
(Please complete the following)

☐ For Profit Vendors: I would like to reserve ____ table(s) at a cost of $25 per table, as I plan to sell school-age care related resources and products at this event.*

☐ Non-Profit Vendors: I would like to reserve ____ table(s) at a cost of $10 each (or a door prize valued at $25, in lieu of table cost); as I will provide information only, and am a non-profit agency.*

☐ I am also willing to provide____school-age care resource(s) or other, as door prizes for your event; and will mail them to the address listed below no later than 9/05/12. Please indicate the door prize you will send:

________________________________________________________________________

*Please remit payment with Exhibitor Registration Form; make check payable to: SoDakSACA

☐ NO. I am unable to be an exhibitor at your conference this year. However, please keep me on your mailing list for future conferences.

☐ I am willing to provide____school-age resource(s) as door prizes for your event; and will mail them to the address listed below no later than 9/5/12. Please indicate the door prize you will send:

________________________________________________________________________

Name:_________________________________________________________ Date______________________

Organization:________________________________________________________________________

Mailing Address:______________________________________________________________________

City:________________________________________State:______ Zip______________

 Telephone:____________________ Fax:____________________ E-mail:__________________________

Send Exhibitor Form, Payment and Door Prize to:

SoDakSACA
% Ryan Zens
3660 Sturgis RD Ste #4
Rapid City, SD 57702