



**Active Aging Fair  
September 27, 2019  
12:30–3:30 pm**

Table Reservation Form

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**EARLY BIRD SPECIAL: RESERVATION & PAYMENT MUST BE RECEIVED BY AUGUST 15, 2019**

- Size:  FULL table (8' wide) – \$300 / \$350 after August 15  
 HALF table\* (4' wide) – \$175 / \$225 after August 15

We will do our best to accommodate requests for your booth space.

- Access to electricity:  yes  no  
Booth location:  by wall  room center

Is there anything we should know about your display? (e.g., display posters/boards, audio-visual, etc.)  
If you reserved a ½ table, is there someone you'd like to share with?

\_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN PAYMENT AND FORM BY EITHER METHOD BELOW:**

***NOTE: Payment must be received with reservation form.***

- Mail or drop off this form and payment to The Center Check amount: \_\_\_\_\_  
 Scan and email completed form with credit card information to [margaret@thecentercville.org](mailto:margaret@thecentercville.org)  
Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CCID \_\_\_\_\_

**When sending in your application, please include a 2–3 sentence description/bio of your organization with contact information for the public to be included in the attendee handout.**

Make check payable to: **The Center** and send to **491 Hillsdale Drive, Charlottesville, VA 22901**

***NOTE: NO EXHIBIT BREAK DOWN BEFORE 3:30 PM***

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**FOR OFFICE USE:**

TABLE FORM RECEIVED ON \_\_\_\_\_

CHECK # \_\_\_\_\_ IN AMOUNT OF \$ \_\_\_\_\_ RECEIVED ON \_\_\_\_\_

TABLE ASSIGNMENT # \_\_\_\_\_