Dear Prospective Exhibitor:

Prairie State College will host its’ 2nd Annual “Changing Perspectives and Altering Perceptions: Understanding Mental Health” Conference on our Chicago Heights Campus. The purpose of the event is to increase awareness of the complexities of mental illness and provide ways to reduce the associated stigmas.

Participants will have the opportunity to hear from state wide and local experts during both general educational sessions and breakout sessions. The audience will include a combination of professionals who work in the fields of education, police departments, fire fighters, social workers, counselors and more. The exhibit area will also be open to Prairie State College students, staff and community members.

We invite you to become a part of the exhibit expo on September 17, 2015 from 7:30 a.m. to 4:30 p.m. The cost of a 6 foot table is $295 (electricity is available upon request). Each table reservation includes two tickets to the conference and lunch. Expo hours are 7:30–8:30 a.m. and 11:30–1 p.m. Please use the form on the reverse side of this letter to reserve your exhibit table and return by August 28, 2015.

We hope that you will join us in making this event an overwhelming success. Please contact me at (708) 709–7799 or via e-mail lpickens@prairiestate.edu if you have questions or require additional information.

Sincerely,

Lisa Pickens
Caseworker, Adult Education Department
Exhibitor Registration Form

Thursday, September 17, 2015
Exhibit Hours: 7:30 – 8:30 a.m. and 11:30 a.m.-1 p.m. | Vendor set up: 7 – 7:30 a.m.
Booth Price $295 (includes breakfast and lunch)

Company Name: ________________________________________________________________

Company Address: __________________________________________________________________________

City: ___________________________________________ State _______ Zip Code: __________________________

Representative 1 attending
______________________________
Phone: ______________________________
Email: __________________________
Are you bringing a large floor display?    Yes [ ]    No [ ]
Do you need access to an electrical outlet?    Yes [ ]    No [ ]

Representative 2 attending
______________________________
Phone: ______________________________
Email: __________________________

Payments:
[ ] Check enclosed. Make check payable to: Prairie State College
[ ] Credit Card Payment.

Credit Card Number

[ ] Visa  [ ] MasterCard  [ ] Discover

Expiration Date Security Code

[ ] Visa  [ ] MasterCard  [ ] Discover

Name on Card: __________________________

Register by August 28.

Please submit to Lisa Pickens:
Fax (708) 709-7818, email lpickens@prairiestate.edu or call (708) 709-7799.