



VENDOR REGISTRATION FORM

2020 HMONG RESOURCE FAIR

NEW MILLENNIUM ACADEMY

5105 BROOKLYN BOULEVARD, BROOKLYN CENTER, MN 55429

SATURDAY, MAY 9, 2020 FROM 10:00 AM TO 2:00PM

Please Print or Type

Organization/Company _____
Contact Name _____ Title _____
Address _____
City _____ State _____ Zip _____
Phone Number _____ Fax _____
Email Address _____ Website _____
Name(s) of staff attending _____

Area of Focus (Check one only)

- | | | | | |
|--|-----------------------------------|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Bank/Finance | <input type="checkbox"/> Business | <input type="checkbox"/> Community | <u>Education</u> | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Health | <input type="checkbox"/> Housing | <input type="checkbox"/> Government | <input type="checkbox"/> PreK to 12 | <input type="checkbox"/> Environment |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Legal | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Higher Education | |

Specify services, products and/or health screening(s) your organization provides for the community:

- ☐ **Non Profit - \$200**

☐ **Government/Higher Ed. - \$250**

☐ **For Profit - \$300**

Registration Deadline is Friday, May 1st, 2020

PAYMENT WITH THIS REGISTRATON FORM IS REQUIRED

EXHIBITOR STATEMENT (Please read the following carefully and sign):

I agree to be an exhibitor at the Hmong Resource Fair on Saturday, May 9, 2020. I understand that the non-refundable booth fee provides me with one (1) table and two (2) chairs. I further understand that my payment must be received by the registration deadline in order to confirm my booth space. As an exhibitor, I assume full responsibility for all of my equipment and products, and hold harmless the organizers of the fair. Furthermore, I authorize the Hmong Resource Fair organizers the use of video and photography of my company/organization for public relation purposes. I also understand that the Hmong Resource Fair reserves the right to refuse any exhibitor whose products or services conflicts with its mission and principles.

I have carefully read and agree to abide by the above statement:

Authorized signature: _____ Date: _____

Please make check payable to: **Hmong Education & Resources Today (HE&RT)**
Append your check and mail to: **270 Larpenteur Ave. W., Saint Paul, MN 55113**

For Office Use Only:

Staff Name _____
Date Received _____ Amount of Payment _____
Confirmation Sent _____ Email _____ Letter _____ Other _____