



**SOUTHWEST INDIAN AGRICULTURAL ASSOCIATION**

**22<sup>ND</sup> ANNUAL CONFERENCE  
EXHIBIT REGISTRATION FORM**

Organization: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Exhibit space is limited to one 6-foot table and two chairs per exhibitor.

Electrical Requirements (be specific) \_\_\_\_\_

Exhibitor's Anticipated Check In Time: \_\_\_\_\_:\_\_\_\_\_ am or pm (please circle one)

Date: \_\_\_\_\_

Set-Up Completed \_\_\_\_\_:\_\_\_\_\_ am or pm (please circle one)

Type of Exhibit and Cost: \_\_\_\_\_ Amount Enclosed

Educational Institutional - **\$75.00** \_\_\_\_\_

Tribe or Tribal Member - **\$100** \_\_\_\_\_

Commercial/Agency - **\$300** \_\_\_\_\_

Total Amount Enclosed \_\_\_\_\_

**Note: Exhibit registration includes registration fee for one person. Please provide name for nametag and meals provided with registration.**

Name: \_\_\_\_\_

Please send this completed form and check to:

SWIAA  
P.O. Box 93524  
Phoenix, Arizona 85070-3524