



INDIANA

2008 Conference

"Knowing the Past Helps Protect the Future"

VENDORS/SPONSORS REGISTRATION / Conference dates: July 6-11, 2008

Single 8x10 Exhibitor Booth registration fee: \$500.00 (*Inquire about multi-booth discounts*) \$ _____

Would you like to order an IADLEST conference golf shirt(s) (\$20.00 each)?
Specify size and quantity: S____, M____, L____, XL____, XXL____ \$ _____

Would you like to participate in the 5K run/walk (entry fee is \$15.00)?
Yes____ No____ (All proceeds will go to the Special Olympics) \$ _____

Unable to attend?
Your company can still advertise its products and services to the IADLEST attendees!
We will place your company's materials in the attendees' conference packets for a nominal fee of \$200.00. \$ _____

Send registration form to: Perry Hollowell, Indiana Law Enforcement Academy P.O. Box 313, Plainfield, IN 46168. Phone: 317-837-3278, Fax: 317-839-5380.	TOTAL: \$ _____
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Showcase your company by sponsoring a conference event as a:

Platinum Level Sponsor

Gold Level Sponsor

Silver Level Sponsor

Bronze Level Sponsor

Receive additional recognition by providing door prizes!

For sponsorship information contact: Perry Hollowell 317-837-3278 or email phollowell@ilea.in.gov
or visit IADLEST Conference – Indiana 2008 at: www.iadlestconference.org

How would you prefer to receive your registration confirmation? (circle one): Fax or Email

Company/Organization: _____
 Exhibitor's Name: _____
 Title: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: _____
 Fax: _____
 Email: _____

Exhibitor fee includes: Exhibitor space, one table and two chairs.

☞ Exhibitor space is assigned on a first-come, first-serve basis, Inquire Perry Hollowell at Phone: 317-837-3278 for availability of specific locations

☞ Any special needs, such as, a telephone, computer web access, or electricity must be made directly with the Crowne Plaza Hotel at 317-631-2221.

Registration and deposit due on or before:
March 1, 2008 (\$250.00 deposit required)

Balance due on or before: April 14, 2008
(10% late fee will be applied to balances not paid in full by this date.)

Vendor's setup: July 7, 2008 from 6:30 A.M. to 9:30 A. M.

Vendor's teardown: July 9, 2008 from 3:00 P.M. to 5:00 P. M.

Payment Methods

Check # _____ Make checks payable to: **IADLEST Conference – Indiana 2008**

Credit Card Type _____ Account #: _____ Exp. _____ Security code _____

Statement Address _____ State _____ Zip _____

Conference Location: Crowne Plaza Hotel & Conference Center, 123 West Louisiana St., Indianapolis, IN 46225. Phone: 317-631-2221
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Visit our website at www.iadlestconference.org

Phone: 317-839-5191, Fax: 317-839-9741

Indiana Law Enforcement Academy P.O. Box 313, Plainfield, IN 46168