

Exhibitor Registration Form

Company name:		
Company address:		
City:	State:	Zip:
Company contact:		
Phone number:	Email address:	
	Show Hours	
	Monday, September 22, 2025, 8	:00 am to 5:00 pm
	(Set up is Monday Sept 22, 2	
	Tuesday, September 23, 2025 8	,
	Wednesday, September 24, 202	
	(Exhibitors must vacate	
	(=2.1.1101010110101101011	
	Electricity required: Yes	No
You	r Company must supply all electric	cal cords and adapters.
Please reserve the following	g (fill in number of spaces reque	sted)
Building Indoor/	Building Outdoor space – 1 tab	ole for all 3 days @ \$400 each
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Outdoor Apparatus	s space approx. 18' X 34' for	all 3 days @ \$300 per space
Types of wares or equipmer	nt to be displayed	
	Outdoor Space: Cost for one	
(Indoor Space is inside the I	ouilding, Outdoor Space is ou	tside, under a tent enclosure)
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Outdoor Apparatus Spaces	: Cost for an outdoor space is	\$300 per space.

- <u>SPACES ARE LIMITED!</u>
- Location of spaces are assigned at the sole discretion of the DVFA Exhibits Committee.
- There are no refunds once a deposit is received.
- All registration forms and payments must be received no later than July 15, 2025.
- Meals are not included in the exhibitor fees.

The Conference committee stipulates that no exhibitor will sell any products that contain the name of Delaware Volunteer Firefighter's Association or any affiliated association; the current, past, or future DVFA Conference location and dates, without prior written approval of the Delaware Volunteer Firefighter's Association and the DVFA Conference Executive committee.

Exhibitor agrees to conform to all rules and regulations of the Delaware Volunteer Firefighter's Association and comply with all State and local laws.

Credit card information in the amount stipulated on the registration form will be due with the registration form to secure your space. If you have any questions, please contact the DVFA Office 302-734-9390.

Your signature on this registration form means you have read the rules and regulations listed on the Delaware Volunteer Firefighter's website and are in agreement with same.

Authorized Signature:	Date	
	Enter Credit Card information below	
Name on card		
Visa MC Card N	umber:	-
Expiration:/	3 Digit Security:	
Zip Code:		
Email address:		_
Phone number:	Date:	

Enter info onto this form, save a file for your records and email to Randy.Roberts@Chase.com no later than July 15, 2025 to secure your space.

The only way to secure a space is by paid registration.
There are no refunds.