

VENDOR REGISTRATION FORM

— ILLINOIS REPUBLICAN STATE CONVENTION

PERSONAL INFORMATION

Name of Company :
(Displayed on booth)

Contact Name :

E-Mail :

Address :

City : **State** **ZIP**

Phone :

COST: \$200.00 - INCLUDES VENDOR TABLE AND SIGNAGE

Pay by Check

Please make checks payable to Illinois Republican Party. Completed forms and checks may be returned to: Illinois Republican Party P.O. Box 78 Springfield, IL 62705



Credit Card Attached to Win Red

VENDOR HALL WILL BE OPEN:

- FRIDAY MAY 24TH: 9:00 A.M. - 8:00 P.M.
- SATURDAY MAY 25TH: 9:00 A.M. - 3:00 P.M.

Additional Requests or Questions?
Please email stateconvention@illinois.gop



For information on the area and activities visit www.riversandroutes.com

THANK YOU