



Autism Family Services of New Jersey

6th Annual Beach Bash
Sunday, September 12, 2010

Exhibitor Application

Thank you for the interest in exhibiting at Autism Family Services of New Jersey's 6th Annual Beach Bash in Belmar, NJ. At the request of our attendees, we will be expanding the event to include an exhibitor tent where attendees can learn of products, programs and services related to the autism community.

Benefits for Exhibitors

- The Beach Bash is free for attendees and has doubled in size each year since its inception in 2005.
- In 2009, over 5,000 people from the autism community attended the event.
- All attendees have a specific interest in autism, making this a prime target for ASD products, services and programs
- Majority of attendees are from New Jersey with some individuals traveling from as far as Delaware, Pennsylvania and Rhode Island.
- Autism Family Services of New Jersey will include a link to all approved vendor websites on our website through December 2010.

Standard Booth Equipment & Information

- Set Up begins at 7:30am and all exhibitors must be set up by 9:00am
- Vendors are responsible for setting up and taking apart their own space. Please note that the event is physically on the beach, in the sand, and loading of materials is the sole responsibility of the exhibitor.
- Each space will consist of one 6 foot table and two chairs.
- Includes two wristbands for the lunch tent.
- Electricity is available on a first come, first served basis for an additional \$ 25.00 per space.

All exhibitor applications are pending approval of the review committee. A decision will be made within two weeks of submission. Once reviewed, all applicants will be notified as to the final decision of participation.



Beach Bash Application Form

Name of Company/Organization		
Address		
Address 2		
City	State	Zip
Telephone	Fax	
Email		
Booth Attendant 1		
Booth Attendant 2		
<p>EXHIBITOR PROFILE: Please describe your organization, products and/or services (50 words or less) Attach your profile to the Exhibitor Registration Form. *If your business is selling items at your table, all items must be approved by Autism Family Services of New Jersey in advance and a copy of your Tax Identification Number must be sent in with your Exhibitor Registration Form.</p>		
Cost of Table: \$ 350.00		
Number of Tables (please circle): 1 Table for \$ 350.00 2 Tables for \$ 600.00		
Electricity - \$ 25.00 per table (please circle): yes no		
Total Amount: \$		
<i>Total Amount due via check or credit card with submission of application</i>		
Credit Card #:		
Expiration Date:	CVV#:	Billing Zip Code:
Name on Card:		

Please clearly print or type.
 Mail completed forms and payment to:
 Autism Family Services of New Jersey
 Attn: Samantha Griffiths
 1 AAA Drive, Ste 203
 Trenton, NJ 08691
 Phone: 1-877-237-4477 Fax: 1-609-392-5621
 sgriffiths@autismfamilyservicesnj.org