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The Registered Dietitian / Nutritionist

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Tennessee Dietetic Association Annual Meeting April 20, 2012 Baptist Hospital, Nashville, Tennessee

Exhibitor Registration Form

By signing these papers, we authorize TDA to reserve an exhibit space in our name. Please print or type clearly. Please return by February 29, 2012 in order to reserve your space.

Company Name _____
 Company Contact _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Mobile _____ Fax _____
 Email address of Contact Person _____
 Authorized Signature _____

Please provide the above information as you wish it to appear in the meeting materials and signs. Please email your logo in jpeg format to Shelley Flint at eatrighttn@gmail.com or send on cd with registration.

Name of Person(S) Attending Meeting for CEU's _____

TDA will provide you with a banquet table & 2 chairs for your exhibit. Set-up time is 6:00am-7:00am on April 20, 2012. If you need other amenities (i.e. Power outlet) please let us know below and we will do our best to accommodate you. We will need the following amenities if possible:

My company wishes to participate and be listed in the program as: Please circle your choice

___ \$3500 Keynote ___ \$2500 Platinum ___ \$2000 Diamond
 ___ \$1500 Emerald ___ \$750 Ruby Exhibitor
 ___ \$600 General Exhibitor ___ Non-profit

**Please mail this completed form and your check payable to
The Tennessee Dietetic Association to:**
 Tennessee Dietetic Association
 C/o Shelley Flint
 544 Wilson Dr.
 Mt. Juliet, TN 37122

TDA Federal Tax ID 23-7046098

Do you have questions? Contact Shelley Flint
615-732-3124 or e-mail eatrighttn@gmail.com