WEST VIRGINIA ASSOCIATION FOR PUPIL TRANSPORTATION

EIGHTH ANNUAL STATE SCHOOL BUS TRANSPORTATION CONFERENCE

CANAAN VALLEY RESORT & CONFERENCE CENTER
230 Main Lodge Road, Davis, WV 26260
JULY 15 – 18, 2024

EXHIBIT REGISTRATION CONFIRMATION FORM

| NAME OF COMPANY ADDRESS CONTACT INFORMATION | | |
|--|---|---------------|
| NUMBER OF REGISTRANTS | | |
| NAME OF REGISTRANT(S) | | |
| · · | | |
| | | · |
| Exhibit Fee | \$200.00 for on 8' space | \$ |
| | \$200.00 for additional 8' space # of extra space | ces \$ |
| Registration Fee | \$225.00 per person | |
| (Includes some meals) | (Each person with exhibit is required to pay) | |
| | Number of persons X \$225.00 | \$ |
| | TOTAL AMOUNT ENCLOSED | \$ |
| PRE-REGISTRATION MUST BE RECEIVED ON OR B | EFORE JULY 1, 2024. | |
| Do you have a back drop? Yes \square No \square | | |
| If yes, is it a full back drop \square or a banner style (te | lescopic, small in size, displayed at side \square | |
| Will you need electricity? Yes $\Box\:$ No $\Box\:$ | | |
| removed prior to 4:00 PM on Tuesday, J | y 15 between the hours of 9:00 AM and 12:00 PM and 4:30 PM | |
| | ow what days you will be present throughout the week: | reday Marning |
| Monday Evening Wednesday Morning | Wednesday Lunch Wednesday Evening Thu | rsday Morning |
| LOADING, UNLOADING, SECURITY AND/OR HAND | LING OF EXHIBITS WILL BE THE RESPONSIBILITY OF THE EXHIBITO | DR. |
| Please make all checks payable to: | | |
| WEST VIRGINIA ASSOCIATION FOR PUPIL TRANSPORTATION (WVAPT) | | |

Peggy Stone, Treasurer P.O. Box 47 Matheny, WV 24860

Email peggy.stone@k12.wv.us for additional information, instructions or a link to use a credit card