



COMMUNITY RESOURCE FAIR VENDOR REGISTRATION FORM

**Registration Forms Due:
Friday, July 7, 2023**

Please see the event flyer for more details.

Business/Organization Name:		
Business/Organization Address:		
Contact Person(s): <i>(please include first and last name)</i>	Position:	
Office Phone Number:	Cell Phone Number:	
Email Address:		
Alternate Contact:	Position:	
Phone Number:	Email:	
<i>Please indicate your preferred method of communication for any event updates and/or questions:</i>		
<input type="checkbox"/> Phone Call	<input type="checkbox"/> Text Message	<input type="checkbox"/> Email
<i>Please select the business type that best describes your business or organization.</i>		
<input type="checkbox"/> Arts + Cultural Services	<input type="checkbox"/> Child Health	<input type="checkbox"/> Education
<input type="checkbox"/> Environment	<input type="checkbox"/> Finance	<input type="checkbox"/> Fitness
<input type="checkbox"/> Food Services + Nutrition	<input type="checkbox"/> Health Care	<input type="checkbox"/> Legal
<input type="checkbox"/> Mental Health	<input type="checkbox"/> Municipality	<input type="checkbox"/> Occupational
<input type="checkbox"/> Other <i>(please indicate below)</i>	<input type="checkbox"/> Religion	<input type="checkbox"/> Safety
<input type="checkbox"/> Social Service	<input type="checkbox"/> Transportation	<input type="checkbox"/> Youth Services
Other:		
Briefly describe your table/booth display:		
Will you be providing screenings that may require privacy?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Will your organization be bringing an employee/volunteer who speaks another language? If yes, what language(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No

When your registration is received, you will receive confirmation. Reminders about set up and the event will be sent closer to the date. Your form can be submitted the following ways:

Email:

Kaitlyn Shidler
kshidler@logansportmemorial.org

Fax:

Attn: Kaitlyn Shidler
574-753-1410

Mail:

Logansport Memorial Hospital
C/o Kaitlyn Shidler
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Logansport IN 46947