SOUTHERN ILLINOIS BEHAVIORAL HEALTH SUMMIT

SEPTEMBER 24 AND 25, 2026

SPONSOR/VENDOR REGISTRATION

Company: _____ Contact: _____

Rep. 1: _____ Rep. 2: _____

License Number: _____ License Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Rep. 1 Email: _____ Rep. 2 Email: _____

I plan to participate at the following level:

◯ Diamond ($5,000) ◯ Gold ($2,500) ◯ Silver ($1,000) ◯ Friend ($500) ◯ Vendor Only ($175)

Complimentary sponsorship booth space (Diamond, Platinum and Gold only): ◯ I will use ◯ I will not use

Additions (optional): ◯ Electricity ($0) ◯ Representative ($50) ◯ Table ($50)

Additional Rep. Name 1: _____ Additional Rep. Name 2: _____

DIAMOND SPONSOR ($5,000)
- Full page ad in program
- Logo on all marketing materials
- Double vendor table in prominent location
- Admission four up to four attendees
- Breakfast/lunch/afternoon snack for vendor attendees
- Up to four marketing items supplied by vendor in conference tote bag

GOLD SPONSOR ($2,500)
- 1/4 page ad in program
- Vendor table
- Admission four up to two attendees
- Breakfast/lunch/afternoon snack for vendor attendees
- Two marketing items supplied by vendor in conference tote bag

SILVER SPONSOR ($1,000)
- 1/4 page ad in program
- Vendor table
- Breakfast/lunch/afternoon snack for up to two vendor attendees
- One marketing item supplied by vendor in conference tote bag

FRIEND OF SIBHS ($500)
- Vendor table at conference and job fair
- One conference registration
- Participate in conference including breakouts
- Opportunities to participate at the conference including workshop sessions

VENDOR ONLY ($175)
- Vendor table at conference only
- One conference registration
- Participate in conference including breakouts

PAYMENT INFORMATION

Payment type: ◯ Credit Card ◯ Check (payable to SIU Carbondale) ◯ Bill Company (place billing information in credit card area)

Credit Card #: _____ CVC: _____ Exp: _____

Name on Card: _____

Billing Address: _____

Email: _____

SOUTHERN ILLINOIS UNIVERSITY CARBONDALE
EVENTS AND OUTREACH

SOUTHERN ILLINOIS BEHAVIORAL HEALTH SUMMIT

VENDOR AGREEMENT

Terms and Conditions

1. **Vendor Space**
   - Each vendor will be provided a 10' x 10' exhibit area, one skirted 2' x 6' table, and two chairs. Additional tables may be requested at an additional cost.
   - Vendor spaces will be assigned on a first-come, first-served basis upon receipt of payment and completed registration.

2. **Setup and Operation**
   - Vendors may begin setting up at 3 - 5 pm on September 23, 2026.
   - Vendor booths must be staffed during conference hours (7:30 - 8 am) on both days.
   - Vendors are responsible for providing their own table coverings, display materials, and equipment. Electricity is available upon request at no additional charge.

3. **Cancellation Policy**
   - Vendors must provide a written cancellation notice no later than 10 business days prior to the event to receive a full refund. Cancellations after this date will not be refunded.

4. **Door Prize Requirement**
   - Vendors are required to provide a gift card or gift basket with a minimum value of $25 for door prizes. The vendor is responsible for collecting registrations for their own giveaway.

5. **Liability**
   - The Vendor assumes full responsibility for any damage or loss of property brought to the conference.
   - The Conference Organizer shall not be held liable for loss, theft, or damage to Vendor property, or for any injury that may occur at the event.

6. **Compliance**
   - Vendors agree to comply with all applicable laws, regulations, and venue rules during the conference.

7. **Termination**
   - The Conference Organizer reserves the right to terminate this agreement and vendor participation without refund if the vendor violates any terms of this agreement.

Agreement Acknowledgment

By signing below, the Vendor agrees to the terms and conditions outlined in this Agreement.

Vendor Information

Company: _____ Representative: _____

Authorized Signature: _____ Date: _____

SEND BOTH PAGES OF THIS VENDOR AGREEMENT TO:

Complete form and return to:
Events and Outreach
Anthony Hall – Mail Code 6705
Southern Illinois University
1265 Lincoln Drive
Carbondale, IL 62901

Questions? Call (618) 536-7751