

**Back to School Health and Safety Fair**  
**VENDOR REGISTRATION FORM**  
Page High School, Pool Gymnasium  
August 1, 2014  
12:00 p.m. to 3:00 p.m.

Please complete and return the attached form to Lola Riggs: LRiggs@coconino.az.gov

**1. Please provide the following information for your organization's representative for this event:**

*Organization:*

*Contact Name:*

*Title:*

*Address:*

*City/Town and Zip:*

*State:*

*Email Address:*

*Contact Phone:*

*Fax:*

*Website:*

**2. Please provide a short description (2-4 sentences) of your organization as well as a description of the type of activity you will have at your table:**

Organization Description (please note that these will be shared with the other vendors and families attending the event):

Activity at the Event:

**3. What materials or services will be shared with parents/students?**

**4. How did you hear about this event?**

**5. Do you have any questions, comments, suggestions or special requests that you would like us to address at this time? If yes, please include your response below.**

