

The Eldridge North Scott Chamber of Commerce
**2010 Discover North Scott
 BUSINESS FAIR**

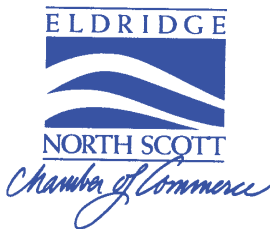
Thursday, October 7, 2010
 4:00 p.m. to 7:00 p.m.
 Eldridge Community Center
 400 S. 16th Avenue, Eldridge

This is the perfect opportunity to showcase your business to the North Scott community. Don't miss out! In past years this fair has attracted over 1500 people. Fill out the registration form below and mail it today with your payment to reserve a spot at this years fabulous fair.

Back for 2010! Businesses can contribute \$25 to go to a Grand Prize for the event. In order to be eligible for the prize, attendees must have a card punched at all participating booths. Limited to the first 25 businesses that sign up!

Each booth will have a table, skirting, sign, and two chairs (one for 1/2 booths). A confirmation letter and further instructions will be mailed after our deadline on September 20, 2010.

If you have any questions, please call Jeff Martens, Business Fair Committee Chairman, at 285-8111 or Carolyn Scheibe, Chamber Director, at 285-9965.



2010 DISCOVER NORTH SCOTT BUSINESS FAIR

Business Name: _____

Address: _____ (as you want it to appear on your sign)

Contact Person: _____ Phone: _____

Would you like to donate a door prize: Yes No If yes, describe item: _____

PLEASE CHECK ALL THAT APPLY:

Chamber Member:	Non-Chamber Member:	Extra Amenities:
<input type="checkbox"/> Full Booth \$125	<input type="checkbox"/> Full Booth \$250	<input type="checkbox"/> WiFi \$20
<input type="checkbox"/> Half Booth..... \$80	<input type="checkbox"/> Half Booth..... \$160	<input type="checkbox"/> Electricity \$30
<input type="checkbox"/> Service Club/Church.. \$25 (half booth)	How will electricity be used: _____	
<input type="checkbox"/> Grand Prize Contribution \$25 (see details above.)		

Please return this form and your payment by our Deadline on September 20 to:
Eldridge/North Scott Chamber of Commerce
 220 W. Davenport St.
 Eldridge, Iowa 52748
 or fax: 563-285-9964

METHOD OF PAYMENT: (Circle One) Check M/C Visa Disc.
 Card # _____ Exp. Date _____
 Name on Card: _____
 Signature: _____