

DISABILITY RESOURCE & TRANSITION EXPO

ONCE AGAIN, we are bringing together hundreds of people with disabilities and their families in Southern Arizona with nearly a hundred service providers for what has become a "signature" event for Tucson! For all those dealing with a disability and asking themselves "What's next?..." this will be a one-stop shopping opportunity to find those answers.

If you are a provider of services or support for people with disabilities, reserve your space for **CONNECTING TUCSON** today! It's easy and inexpensive. The Provider/Agency registration fee is only \$35.00, and it will reserve you a display table at the event.

Don't be the missing piece of this very important puzzle. Make sure your organization is there to tell your story and found by those who need your services. **Registration deadline is April 22nd, 2015.** Space is limited... <u>First come</u>, <u>first served!</u> *See you there!*

Main Entrance & Parking located one block north of Glenn Street on Laguna Street.



Provider/Agency REGISTRATION

EVENT DETAILS

Saturday, April 30, 2016 9:00am - 1:00pm Beacon Group 308 West Glenn Street Tucson, AZ 85705

\$35 REGISTRATION INCLUDES:

- 6' covered Table & (2) Chairs
- Lunch
- Listing in the official Connecting Tucson Program

FIRST COME, FIRST SERVED

Please complete the clip-off form below and return it by fax, mail, or electronically by April 22, 2016 to:

Patrick McCarthy Beacon Group 308 West Glenn Street Tucson AZ 85705 phone (520) 622-4874 x 166 fax (520) 620-6620 pmccarthy@beacongroup.org

This form and more information about the event is available online at **www.connectingtucson.org**

CLIP OFF BELOW & MAIL WITH PAYMENT, or... IF PAYING WITH CREDIT CARD, YOU MAY FAX THIS ENTIRE SHEET

Agency Name		
Contact	Position/Job Title	
Address		
City	State ZIP	
Tolombono	Fav	

We want to Connect! Please reserve a display table for our agency!

Telephone _______Fax _________Fax _________

PAYMENT INFORMATION (check ONE only)

- O Check enclosed (payable to "Connecting Tucson") for the amount of \$35.00
- O Please bill my credit card

Agency Website: www._____

Type of card _____ Number ____

Exp. Date ______ Name on card ____

DEADLINE: PLEASE REMIT WITH PAYMENT NO LATER THAN FRIDAY, APRIL 22, 2016.

O I require electricity for my space No amplified sound will be allowed. Any A/V devices must be fully muted.

DO NOT WRITE HERE — INTERNAL USE ONLY