



**25<sup>th</sup> Annual Conference  
February 21-22, 2020**

DoubleTree Suites by Hilton, 320 N. 44<sup>th</sup> Street, Phoenix, AZ 85008

**2019-2020 BOARD OF  
DIRECTORS**

Juliet Fortino, President  
Kristi McReynolds, Secretary  
Katie Farner, Treasurer  
Dana Holtz  
Jenn Pereira  
Gabriel Rischall  
Jaxinta Shaffer  
Heather Sestili  
Paulina Smith

**CONTACT INFORMATION**

**Phone**  
602-730-2046

**Address**  
AZAPT  
5940 W. Union Hills Drive  
Suite D-260  
Glendale, AZ 85308

**Email**  
info@azapt.org

**Website**  
[www.azapt.org](http://www.azapt.org)

TO: Potential Vendor/Exhibitor  
FROM: AZAPT Board of Directors  
RE: AZAPT CONFERENCE VENDOR/EXHIBITOR OPPORTUNITY

Dear Vendor/Exhibitor:

**The Arizona Association for Play Therapy invites you to be a Vendor at our 2020 annual conference. Our attendees look forward to shopping for new products and services each year and we hope that you will make yours available.**

For our 25<sup>th</sup> Annual Conference, Paris Goodyear-Brown, LCSW, RPT-S, will be presenting *TraumaPlay™: A Flexibility Sequential Play Therapy Model for Trauma and Attachment Disturbances*. This conference has an expected attendance of 170 people and will provide your business with exposure to participants from the Western Region of the United States.

The conference will be held at the DoubleTree Suites by Hilton, 320 N. 44<sup>th</sup> Street, Phoenix, AZ 85008. More details will be provided regarding set-up and move-out once your contract has been completed and confirmed.

Enclosed please find the Vendor Contract to reserve your space. You may also register online. Please note that space is limited, so we will accept reservations on a first come, first serve basis. If you have any questions, please email [info@azapt.org](mailto:info@azapt.org).

Thank you for your consideration. We look forward to seeing you at our upcoming conference!

Sincerely,

*Juliet*

Juliet Fortino, MC, LPC, RPT-S  
President, AZAPT

Arizona Association for Play Therapy  
25<sup>th</sup> Annual Conference  
February 21-22, 2020

**VENDOR/EXHIBITOR SPACE CONTRACT**

**TABLE CHARGE POLICY:**

The table charge is **\$70.00** per table per day. There is a discount for multiple tables and/or days. Each table will be 6 feet in length. Vendors will provide their own identification signs showing their company name, logo, etc. **No table skirt, cash registers, extension cords, or other accoutrements will be provided.** Additional lunch tickets may be purchased for Friday; lunch is on your own for Saturday. *Checks should be made payable to Arizona Association for Play Therapy (AZAPT).*

**SECURITY:**

The Exhibitor Room will be open from 7:30 a.m. until 4:30 p.m. each day. You may leave your things set-up overnight, as the doors WILL be locked at the end of each day.

**MOVE IN:** Friday, February 21<sup>st</sup> or Saturday, February 22<sup>nd</sup> – time TBD  
**EXHIBIT HOURS:** 7:30 a.m. until 4:30 p.m.  
**MOVE OUT:** After 4:30 p.m. on Saturday

**ADVERTISEMENT:**

**All Vendors will receive a listing in the conference packet.** Please complete the information below, including your name, address, phone number AND desired services or product description, **BEFORE February 3, 2020.** **Please send your logo (WORD, JPG, TIF) to [info@azapt.org](mailto:info@azapt.org).**

**CANCELLATION POLICY:**

Written cancellation must be received by 01/31/20 to receive a refund, less a \$35 administrative fee. *No refunds will be made after 01/31/20.*

**CONTRACT ACCEPTANCE & GENERAL INFORMATION:**

Mail your information and check to:  
**AZAPT, 5940 W. Union Hills Drive, Suite D-260, Glendale, AZ 85308**  
You may also **pay online at [www.azapt.org/event-3471108](http://www.azapt.org/event-3471108)**  
Confirmations will be emailed.  
For additional information, please email [info@azapt.org](mailto:info@azapt.org).

---

**CHARGE FOR TABLE(S):**

**1 Table for 1 Day = \$70 (Deadline 02/03/20)**  
**2 Tables for 1 Day OR 1 Table for 2 Days = \$105 (Deadline 02/03/20)**  
**2 Tables for 2 Days = \$130 (Deadline 02/03/20)**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Telephone: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_  
Contact Person \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Name of Person Staffing Table at Event: \_\_\_\_\_

**Space Reservation: Total Number of Tables per day: \_\_\_\_\_**  
**Days Attending (PLEASE CHECK) \_\_\_\_\_ Friday, February 21 \_\_\_\_\_ Saturday, February 22**  
**\_\_\_\_\_ Additional Lunch Tickets (\$30 each) for Friday, February 21 Only**

**Amount enclosed \$ \_\_\_\_\_ Check # \_\_\_\_\_ You may also pay online at [www.azapt.org/event-3471108](http://www.azapt.org/event-3471108)**  
**DESCRIPTION FOR ATTENDEE PACKET: \_\_\_\_\_**