## Exhibitor/Vendor Information

Date	ate Company/Organization:	
Name:		Title:
Phone	Ext.	Email Address
Address		
City	State	ZIP Code
<b>Date:</b> Saturday, April 25, 2 <b>Fime</b> : 8:30 a.m. – 1:00 p.r		Location: DeSoto High School Collegiate Cafeteria 600 Eagle Drive DeSoto, Texas 75115 tration Fee:
	□ Registration	Fee \$50
	]Yes, I need a table and chairs $\Box$ No, I	'm bringing my own table and chairs
	AND	
	$\Box$ I would also like to donate a raffle pr	rize that is valued at \$50 or more.
Description of	raffle prize:	
	Make checks or money Coloring Life P.O. Box DeSoto, TX ATTN: Resou	My Way 1737 75123
Please email	completed registration form to Coloring	Life My Way at info@coloringlifemyway.org or
	mail to P.O. Box 1737 D	
Please provide	e appropriate signage for your space	• Appropriate staffing for the duration of the event
For additional in	formation or to register, Contact Chr info@coloringlif	ristina Henderson at 469-337-4418 or via email at remyway.org