



**2019 Washington State Narcotics Investigators Association
Training Summit and Vendor Show**

April 22, 2019,

Coeur d' Alene Resort, Coeur d' Alene Idaho
One Day Vendor Show Only; 10:00 am to 8pm

Company/Organization: _____

Contact Person: _____

Address: _____

City / State / Zip: _____

Phone: (____) _____ Fax: (____) _____

Email Address: _____ Website: _____

Description of Product/Company: _____

Name as you would like it to appear on your name tag.

1. _____
2. _____
3. _____

Vendor Receives: Table(s) with two chairs and waste basket are provided. The banquet room is carpeted, has internet access and electrical outlets. Setup is Sunday night April 21st from 6p to 9p or Monday April 22nd from 7a to 10a. The WSNIA website will have links to every company that participates in the vendor show for the lead up to the summit and coming year.

- One 8' table \$ 250 I would like to donate \$250 worth of products in lieu of the registration fee
- Two 8' tables \$ \$500 I prefer to donate \$500 worth of products in lieu of fee.

Donated products will be given away as raffle prizes during the vendor show evening in the vendor area.

Sponsorship Opportunities:

Hospitality Suite: April 22nd \$600 April 23rd \$600 April 24th \$600

Sponsor the attendance of Milwaukee County Sheriff, David Clark, Fox News Contributor; includes brief opportunity to address the entire membership of WSNIA \$6000

Become a Major Contributor: Company / Organizations that wants to support the mission of WSNIA, to provide exceptional training to the regions narcotics investigators. Major contributors will have their logo highlighted on website for a year, on all printed materials for the summit, on display boards at the summit.

\$1500

Payment:

Total Booth Cost: _____

Total Sponsorship(s) Cost: _____

TOTAL CONFERENCE COST: _____

Method of Payment

<input type="checkbox"/> Check Enclosed	Make Checks Payable to: Washington State Narcotics Investigators Assoc.
<input type="checkbox"/> Credit Card	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa Card# _____ Expt. Date _____ Name on the Card; _____ ** A 5% Cancellation Fee if paid by Credit Card

Registration Deadline- March 15, 2019

No Refunds After March 20, 2019

Please print this form, complete it and scan it to Sgt. Chris Foreman (see below). If mailing a check please mail it to the address below. If you have further questions, please call Chris at 509-423-6467.

Patroldeputy56@gmail.com

VENDOR RULES AND REGULATIONS

WSNIA

10515 20th St. S.E., Ste. 202
Lake Stevens, WA 98258

**ALL VENDOR: Please read and sign to accept these Rules and Regulations.
This form must be returned along with your registration form.**

Insofar as liability is concerned, vendor agrees to protect, save, and hold the Washington State Narcotics Investigators Association and the Coeur d' Alene Resort and Convention Center, and its employees and all beneficiaries and agents thereof, (hereinafter collectively called Indemnitees) forever harmless for any damages or charges imposed for violations of any law or ordinance, whether occasioned by the vendors or those holding under the vendor, and further, vendor shall at all times protect, indemnify, save and hold harmless the Indemnitees against and from any and all losses, costs (including attorneys fees), damage, liability, or expense arising from or out of or by any reason of any accident or bodily injury or other occurrence to any person or persons or to the property of same, including the vendor, its agents' employees, and business invitees, which arises from or out of or by any reason of said vendor's occupancy and use of vendor premises or a part thereof, except such as shall arise directly from the acts of the Indemnitees. Insurance on each exhibit shall be obtained at the vendor's own expense.

Company Representative: _____ Date: _____