

Texas Association of Healthcare Volunteers

Enhancing healthcare services in Texas since 1944

2026 VENDOR APPLICATION

Conference Dates: June 09-11, 2026

The 2026 State Conference will include a 2-day Vendor Fair. **Tuesday, June 09th**, the room will open at 7:00 a.m. for set-up. The Vendor Fair will open at **1:00 p.m.** and close at **5:30 p.m.** The second day, **Wednesday, June 10th** the Vendor Fair will open at **7:00 a.m.** and close at **2:30 p.m.** To be included as an Exhibitor, a vendor must commit to participation in both sessions. Complete and return this application form with a check **no later than May 18, 2026**

Please Print:

Company Name: _____

Contact Person/Title: _____

Mailing Address: _____

City/ State: _____ Zip Code: _____

E-mail: _____

Phone No: () _____ Cell No: () _____

Please indicate if you need electricity at your booth: **YES** **NO**

Contact the hotel for the electrical fee for the Vendor Fair

By signing below, I agree that I have read and agree to abide by the "Vendor Fair Guidelines."

Signature: _____ Date: _____

The vendor's cost will be based on the number of tables for their exhibit. Each table is **6'x30"**. The fees are outlined on the attachment labeled **Fees for Vendor Fair**.

Indicate the number of tables needed: _____

A check made payable to:

TEXAS ASSOCIATION OF HEALTHCARE VOLUNTEERS is enclosed in the amount of: \$ _____

PLEASE FORWARD THE COMPLETED APPLICATION AND CHECK TO:

Sue Kaulfus
621 Purple Sage Dr.
Seguin, Texas 78155
830.305.0501