



You are invited to be an exhibitor at the 2012 Annual Nutritional Concerns Conference

Nutrition educators, dietetic professionals and teachers from across New York and New England attend this conference year after year. The quality and variety of speakers and exhibitors makes this an exciting educational conference. Your business or organization can gain recognition and network with professionals in the field of nutrition by exhibiting at this event.

If you can't exhibit at the conference, you can participate by sending brochures for us to distribute (see attached registration form). Another way to receive recognition at our Nutritional Concerns Conference is to donate a door prize. This would be greatly appreciated and we will recognize all donors during our lunch break raffle.

DATE: Tuesday, March 13, 2012

PLACE: Albany Marriott, 189 Wolf Road, Albany, NY 12205

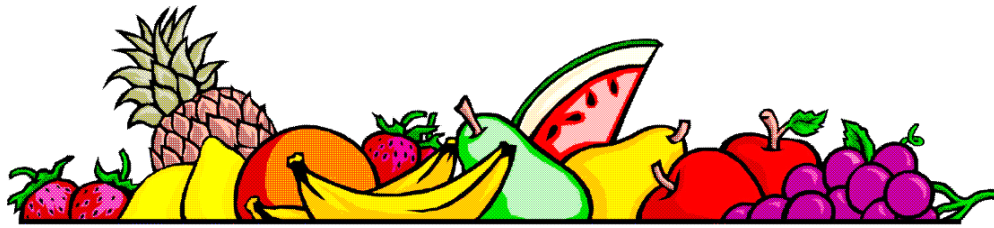
AUDIENCE: Approximately 300 professionals including nutritionists, dietitians, nurses, teachers, community educators and administrators representing WIC programs, Cooperative Extension, food service, schools and health facilities.

TIME: Exhibits must be set up by 8:00 AM and must remain in place until at least 12:15 PM. Exhibits must be staffed for the whole duration of time. Conference registration, exhibits and continental breakfast begin at 8:00 AM. The conference is from 8:00 AM to 3:45 PM. (You may set up as early as 7:30 AM. and may stay set up until 3:45 PM). The format of our conference has changed. Although conference attendees may visit exhibitors throughout the conference, there will be specific times allocated for the attendees to visit you. This will give you more exposure and the ability to leave earlier if you wish. The allocated exhibitor times are as follows: 8:00-8:30; 10:00-10:15; and 11:30-12:15. There will be an additional break from 2:15-2:30 to finish raffling door prizes. Attendees may choose this time to visit exhibitors as well.

SPONSORS: Cornell Cooperative Extension Associations of Albany, Rensselaer, Saratoga and Schenectady Counties.

DIRECTIONS: From South: Take I-87 (Thruway) north to Exit 24 at Albany. Follow I-87 (Northway) north to Exit 4. Turn right off the ramp onto Wolf Road. The Marriott will be on the left. From North: Take I-87 (Northway) south to Exit 4. From the ramp, turn left onto Wolf Road Extension, then left on Albany Shaker Road, then turn right onto Wolf Road. The Marriott is about ½ mile on the left (Beltrone Drive). For more information, call the Albany Marriott at (518) 458-8444.

DEADLINE: Please submit the enclosed Exhibitor Registration Form by March 1, 2012. For additional information, please contact Kim Parnell at Cornell Cooperative Extension of Rensselaer County (518) 272-4210 or e-mail at (kap12@cornell.edu).



2012 NUTRITIONAL CONCERNS CONFERENCE
EXHIBITOR REGISTRATION FORM

(Deadline March 1, 2012)

Organization: _____ Contact Person: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____

Name of Exhibitor #1: _____ Name of Exhibitor #2 _____
(Please print names as you would have them appear on name tag)

Name(s) of other Exhibitors:

Electrical outlet required? ____ Yes ____ No (If yes, how many? _____)

Other special needs:

Please describe your company/organization and its products/services:

Door Prize Donation: _____ Greatly appreciated!!

Door prizes will be collected the morning of the conference.

Exhibits are at the discretion of the Nutritional Concerns Conference Committee and must comply with acceptable standards.

Enclosed is: (Please make check payable to Cornell Cooperative Extension, Rensselaer County)

_____ \$50 Community Based Non-profit Organization-under 50 employees *includes 1 lunch*

_____ \$125 Other Exhibitors – For Profit, Large Non-profits, etc. *includes 1 lunch*

_____ \$25 Extra luncheon

_____ \$25 Information/Brochure Distribution Only (Send 500 copies of each brochure to:
CCE Saratoga County, 50 West High Street, Ballston Spa, NY 12020)

_____ Total

Fee Includes: Exhibit table, electric power source,(if needed), your company or organization information on an Exhibitor List given to all participants, continental breakfast, and luncheon for one person.

Additional lunches may be ordered (see above.)

Luncheon Choices:

Entrée: Choose One

___ **Steak Au Poive: (Peppercorn encrusted filet mignon served with a brandy cream sauce)**

___ **Chicken Alexander: (Panko encrusted chicken breast stuffed with sautéed spinach, roasted red and yellow peppers and cheddar cheese served with an alfredo sauce)**

___ **Black Bean Risotto Cake with Grilled Balsamic Vegetables: (Served with a marinara sauce and drizzled with a balsamic glaze)**

Dessert: Choose One:

___ **Ultimate Chocolate Cake**

___ **Fresh Fruit Plate**

Exhibitor #1 lunch choice _____ dessert choice _____

Exhibitor #2 lunch choice _____ dessert choice _____

Exhibit space is limited. Please respond as soon as possible to guarantee your exhibit space. Please note that checks must be submitted with the registration form. They cannot be mailed separately at a later date. Please send completed registration form and check (made payable to Cornell Cooperative Extension, Rensselaer County) by the March 1st deadline to:

**Cornell Cooperative Extension
Rensselaer County
61 State Street
Troy, NY 12180**

Attention: Kim Parnell

Thanks. We look forward to seeing you!