## **Hidden Science of Alamance County Exhibitor Application**

Thank you for your interest in exhibiting at our Science Expo! Please complete the form below to apply. We will review your submission and contact you with further details.

<b>Contact Information</b>		
Organization/Company N	lame:	
Contact Person Name:		
Email Address:		
Phone Number:		
Website (if applicable):		
Address:		
Exhibit Information		
Exhibit Title/Name:		
Brief Description of Exhil	oit (100-200 words):	
Target Audience (e.g., chi	ldren, teenagers, adults, all ag	ges):
Type of Exhibit (check all	that apply):	
Interactive ac	tivityS	tatic display
Hands-on exp	erimentD	emonstration
Other (please	specify):	
Do you require electricity? Requirements:	Do you require internet acces	s? Exhibit Space
Yes	Yes	Small (6x6 ft)
		Medium (10x10 ft)
No	No	Large *Specify:

## **Hidden Science of Alamance County Exhibitor Application**

Number of Staff Members Attending:	
Do you have any specific setup or teardown needs?	
Yes (please specify):	
No	
Will you be providing promotional materials?	
Yes	
No	
Safety and Accessibility	
Are there any safety considerations or hazards associated with	your exhibit?
Yes (please specify):	
No	
Is your exhibit accessible to individuals with disabilities?	
Yes	
No	
Agreement and Acknowledgment	
By submitting this application, I agree to adhere to the guidelin provided by the event organizers.	nes and safety standards
Signature:	
Date:	

**Submission Instructions** 

Please email the completed form to avivian@alamancelibraries.org by March 28<sup>th</sup>, 2025. For any questions or concerns, contact us at (336) 226-7185 or email above.