



EXHIBITORS APPLICATION

Dear Exhibitor,

The Center for Multicultural Wellness and Prevention, Inc. (CMWP), along with several community partners is in the process of planning the “**21st Annual Caribbean Health Summit**” to be held on Saturday, September 21, 2024, at the Orange County Multicultural Center, located at 7149 West Colonial Drive, Orlando, Florida. The event is scheduled to start at 10:00AM and concludes at approximately 3:00PM.

The theme for this year’s event is “**Makipi Your Health a Priority**”, was developed and agreed to by the Planning Committee to encourage individuals to take control of their health and take personal responsibility to enhance their health and wellbeing.

The Planning Committee has also secured the services of passionate community advocates to serve as this year’s co-chairs, namely, City of Orlando, Commissioner Bakari Burns, District 6, Orange County Commissioner Michael “Mike” Scott, District 6, and Florida State Representative, District 42, Anna Eskamani.

Due to the change in location, the cost to participate as an exhibitor is **\$125.00**, which will entitle you to a **6 ft x 3 ft table and two chairs**. The Planning Committee will be on site on Friday, September 20, 2024, from 12:00PM to 5:00PM to assist vendors to set up their table early. **There will be no booth set up on Saturday September 21, 2024.**

We have enclosed a registration form for your organization to complete. For additional information, please feel free to contact me at (407)648-9440, extension 0, or (407)953-5043. I look forward to seeing you at this new location and hope that you will experience the same level of quality health testing as before.

Sincerely,

Keith A. Gooden

Caribbean Health Summit
Event Coordinator

21st Annual Caribbean Health Summit

Saturday, September 21, 2024 – 10:00am to 3:00pm

Orange County Multicultural Center

7149 West Colonial Drive

Orlando, FL 32808

“Making Your Health a Priority”

Exhibitor Registration Form

Please complete and mail this form along with your \$125.00 per booth payment by August 9, 2024

Organization Name			
Contact Person			
Address			
City	State:	Zip:	
Phone:	Fax:	Cell:	
Email			

List the type of service, materials, activity and give a-ways that will be provided at the event:

_____ Total # of Tables needed _____ Total # of Chairs needed.

Electrical Outlets needed: _____(Yes/No)

Please find a total of \$ _____ enclosed for the 21st Annual Caribbean Health Summit

Make check or money order payable to:
Center for Multicultural Wellness and Prevention, Inc.
1685 Lee Road, Suite 200, Winter Park, FL 32789
Memo: 21stAnnual Caribbean Health Summit

Office phone number is 407-648-9440

Fax: 407-648-8879

ALL PAYMENT IS NON-REFUNDABLE