

NORTHWEST
ALL SPORTS SCHOOL
1020 NW 199th, Shoreline, WA. 98177
(206) 546-6180, richgus@comcast.net

Dear Exhibitor:

You are cordially invited to participate in the **34th Annual "Best in the West" Basketball Coaches Clinic** to be held **Friday, Saturday and Sunday – September 22, 23 & 24, 2006** at the DoubleTree Hotel in SeaTac, Washington.

For clinic information you may also visit our website at www.allsportsschool.com If you visit our website, you will see that we have an outstanding list of clinic speakers. **Our featured speaker this year will be Dean Smith from the University of North Carolina.**

It is going to be a great clinic and we invite you to be an exhibitor for only \$375. If you are interested in participating, please fill in the application and send it, along with the \$375 fee, to **All Sports School, 1020 NW 199th, Shoreline, WA. 98177**. The number of exhibitors and space available is limited and will be filled on a "first come, first serve" basis. Deadline for registration will be September 11, 2006. The fee after September 1, 2006 will be \$400.

Don't miss out on this quality clinic, as it is an opportunity to make important contacts with basketball coaches from all over the Pacific Northwest. Send in your registration form and fee now.

If you have any questions or concerns, please call me at (206) 546-6180 or e-mail me at richgus@comcast.net

Sincerely,

Rich Gustafson
Exhibitor Coordinator

NORTHWEST
ALL SPORTS CLINIC
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BEST IN THE WEST BASKETBALL COACHES CLINIC

Friday, Saturday and Sunday – Sept. 22-24, 2006
DoubleTree Airport Hotel, SeaTac, Washington

CONTRACT FOR EXHIBIT SPACE

Please reserve ____ exhibit space(s) (1 or 2) at \$375 per exhibit space. Each space will include:

**8 foot x 9 foot booth area
one 6 foot table
one chair**

NAME OF COMPANY: _____.

ADDRESS: _____ .CITY: _____.

STATE: ____ PHONE: _____ FAX: _____.

E-MAIL _____.

TYPE OF PRODUCT EXHIBITING: _____.

_____.

NAMES OF PEOPLE WORKING BOOTH: _____.

_____.

To reserve exhibit space(s) return this contract along with your check for \$375. Please make your check payable to **All Sports Schools -BKB**. No refunds after September 11, 2006.

Authorized Signature: _____.

Typed or Printed Name: _____.

Position: _____.

Date: _____.