ADVANCED PRACTITIONERS FOR THE RIVER REGION

VENDOR REGISTRATION AND INFORMATION FORM

COMPANY NAME:_____

TYPE OF VENDOR: 1.PHARMACENUTICAL COST PER TABLE $1500
2. OTHER COST PER TABLE $800
PAYMENT BY CHECK ONLY PAYABLE:

PLEASE BE PREPARED TO SET UP YOUR DISPLAY STARTING AT 6:00 AM ON SATURDAY AUGUST 15TH IN THE VENDOR'S ROOM. TABLES ARE NOT ASSIGNED, BUT ARE FIRST-COME FIRST CHOICE.
SPACE IS LIMITED SO GET YOUR REVERVATIOS IN AS SOON AS POSSIBLE.
THANK YOU FOR YOUR SUPPORT OF OUR ORGANIZATION BY YOUR PARTICIPATION.
DIRECT QUESTIONS TO KATRINA JONES HARRIS.

Mail Payments To:
Advanced Practitioners for the River Region
Tax ID #45-3937561
C/O Carol Anders (Treasurer)
P.O. Box 241737
Montgomery, Alabama 36124

We sincerely appreciate your support and participation. We look forward to partnering with you and seeing you in August 2026. If you have any questions, please contact Katrina Harris at (334)546-4244, DeRay Williams at (334) 322-5090, or Jo Guice at (334) 414-0493.

Regards,

Katrina Jones Harris

Katrina Jones Harris, APRN, FNP-C
President, Advanced Practitioners for the River Region