



P.O. Box 111
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April 2008

Dear Exhibitor:

The Confederation in Oregon For Language Teaching (COFLT) and the Washington Association For Language Teaching (WAFLT) are holding their bi-annual joint state conference, Cross-cultural Communication: Building a Better Future on Friday and Saturday, October 10-11, 2008 at the Hilton Hotel in Vancouver Washington. We expect at least 600-700 educators from elementary to university levels, and invite you to participate by exhibiting, and/or advertising.

Exhibits are always a major conference attraction, enabling attendees to examine, sample, and inquire about a variety of products used in language learning. The exhibits will be in the Discovery Ballroom and will be open Friday from 7:30am to 5:30pm and Saturday from 7:30am to 12:30pm.

We will reserve tables on a first come, first served basis. Set-up will start Thursday, October 9 at 3:00 PM and tear down will begin Saturday, October 11 at 12:30 PM. The exhibit rooms will be locked at 5:30pm and will be opened at 7:30am, and no one will be allowed into the room during those hours. No exceptions!

Exhibitors and others may purchase advertising space in the conference program, see enclosed form for prices. All exhibitors and advertisers will be listed in the program. Ads must be received electronically by September 1, please send ads to: lkiolet@earthlink.net.

As a future opportunity to advertise, you may also want to consider the associations' professional journals. For costs and deadlines on WAFLT's *FORUM* contact Lauren Kiolet at lkiolet@earthlink.com; phone 360 709-0202. For COFLT's *SPECTRUM* contact Ray Verzasconi at rverzasconi@msn.com; phone 503 287-8539.

In the past, some exhibitors have been kind enough to sponsor coffee service for the conference or have generously donated prizes for drawings held at various times throughout the conference. Coffee service will be offered in the exhibit areas and sponsors will be given special recognition in the conference program and at the coffee service tables. These contributions are greatly appreciated. If you would like to sponsor coffee or donate prizes, please indicate this intention on the attached form.

Enclosed is the registration form for exhibit space, advertisements, and sponsorships. ***We must receive your reservation by September 1.*** Upon its receipt we will send confirmation, hotel information, shipping instructions and other details by email. For further information please contact: Candy Lang in the COFLT office, email <coflt@chemeketa.edu>, phone 503-584/7100, fax 503-584-7102.

Vendors wishing to present at the conference should complete the enclosed Proposal Submission Form and send a computer-generated copy with all of the information requested to: larry.crain@gmail.com or mail two print copies to Larry Crain, PO Box 4395, Medford OR 97501.

Thank you,

Larry Crain, COFLT Conference Co-Chair
Jenny Ferries, WAFLT Conference Co-Chair

COFLT & WAFLT 2008 JOINT FALL CONFERENCE
 Friday - Saturday, October 10-11, 2008
Hilton Hotel - Vancouver Washington
EXHIBITOR REGISTRATION – DEADLINE SEPTEMBER 1

To reserve exhibit space, please complete and return this form to COFLT at the address below, with payment. Reservations will be accepted on a first-come, first-served basis; fax or e-mail reservations are subject to receipt of payment within 5 working days. **Registration must be received by September 1, 2008**

Begin typing in the shaded boxes, they will expand. Press tab to go to the next box.

Organization:

Representative(s):

Address:

City, State, Zip:

Phone :

Fax :

E-mail :

EXHIBIT NEEDS: Tables are assigned on a first come, first served basis

Number of tables @ \$200 per table	\$
<input type="checkbox"/> Internet access @ \$30 (two days)	\$
<input type="checkbox"/> Electricity @ \$80 (two days)	\$

MEALS: Indicate number of meals at \$ 25 per person per meal

Friday lunch,	Saturday breakfast,	Saturday lunch	\$
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PROGRAM ADVERTISEMENTS:

Exhibitor: <input type="checkbox"/> full page @ \$150, <input type="checkbox"/> half-page @ \$80, <input type="checkbox"/> quarter-page @ \$40	\$
Non-exhibitor: <input type="checkbox"/> full page @ \$175, <input type="checkbox"/> half page @ \$100, <input type="checkbox"/> quarter-page @ \$50	\$

DISTRIBUTION ITEM:

Registration table pickup - \$50	\$
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COFFEE BREAK SPONSOR: Indicate amount you wish to donate. \$

DOOR PRIZE DONATION/S:

TOTAL DUE \$

PAYMENT ENCLOSED (PAYABLE TO COFLT)

By check (if request faxed please indicate check # _____) **Must be received within 5 working days.**

By credit card # _____ Expiration date _____

Address where credit card bill is received: _____

Signature _____

Exhibitor assumes responsibility and agrees to indemnify and defend COFLT, WAFLT and the Hilton Vancouver Washington and their respective employees and agents against any claims or expenses arising out of the use of the exhibition premises. The Exhibitor understands that neither COFLT, WAFLT nor the Hilton Vancouver Washington maintain insurance covering the Exhibitor's property and it is the sole responsibility of the Exhibitor to obtain such insurance.

SEND THIS FORM WITH PAYMENT TO:

COFLT, PO Box 111, Salem OR 97308-0111.

Questions: phone: 503-584-7100; Fax :503-584-7102 or e-mail <coflt@chemeketa.edu> Fax or email registrations accepted subject to receipt of payment. Confirmation will be emailed when payment is received.

COFLT – WAFLT FALL CONFERENCE
Cross-cultural Communication: Building a Better Future
10-11 October 2008 – Vancouver WA Hilton Hotel
PROPOSAL SUBMISSION FORM

Submission deadline: June 30, 2008

Send a computer-generated copy with all of the information requested below to: larry.crain@gmail.com or mail two print copies to Larry Crain, PO Box 4395, Medford OR 97501. All presenters are expected to register as conference participants and to be members of COFLT, WAFLT or PNCFL. No hand-written proposals will be accepted.

Begin typing in the gray boxes they will expand as you type.

Name:

Employment title and location:

Preferred mailing address (street, city, state and zip):

Work phone:

Work email:

Home phone:

Home email:

Co-Presenter(s) Name:

Address (street, city, state and zip):

Work Phone:

Work email:

Home Phone:

Home email:

Title of the Presentation:

Synopsis for the program in English. Describe your presentation fully in seventy five (75) words or less. Longer statements will be edited. Please indicate language of your presentation if not in English.

Have you ever given this presentation before? No , Yes When and where?:

Main audience: K-8 , 9-12 , College/University , Other

Primary focus: All languages , ASL , CH , ESL , FR , GE , JA , SP , Other

Conducted in: ASL , CH , ESL , FR , GE , JA , SP , Other

Content Focus: Pedagogy , Linguistics , Literature/Culture , Professional Issue , Other

Format: Single presentation , Panel , Workshop w/activities , Publisher/Exhibitor

Length of session: 50 minutes , 100 minutes

Equipment needed: Overhead , TV/VCR , Audio-Cassette/CD player

Equipment not requested at this time **WILL NOT** be provided.

We are unable to supply computers or computer projectors.

Presiders wishing to sell any materials must register as an exhibitor and sell items ONLY at their table.

Sales are prohibited during sessions.

Please provide a brief biographical sketch for use by the presider when introducing you: