

Central Atlantic Conference  
Annual Meeting Display Request

Organization Name:

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Contact Person:

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Address:

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Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Number of Tables \_\_\_\_\_

Special Needs (i.e.  
electricity) \_\_\_\_\_

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Housing Information needed \_\_\_\_\_

Cost for table is **\$65.00**. Please make check payable to Central Atlantic Conference, UCC and mail to the Conference, attention: Arnetta Jones, 916 S. Rolling Rd. Baltimore, MD 21228