



SCCAAS 2019 Statewide Conference on African American Studies
February 2, 2019
South Carolina Department of Archives and History
8301 Parklane Rd, Columbia, SC 29223

Dear Exhibitor,

Thank you for your interest in promoting African American Studies in South Carolina. Your endorsement and commitment are very important to us. This year the South Carolina Council for African American Studies (SCCAAS) will hold their annual conference in Columbia, SC on Saturday, February 2 at the South Carolina Department of Archives and History. The theme of our conference is “*African American Studies in the Classroom: An Interdisciplinary Approach.*” We look forward to your involvement at the conference. Please also consider submitting a proposal for a session presentation; we welcome your expertise.

Exhibit Information

REGISTRATION: December 11th, 2018 – January 15th, 2019

- \$50 Fee
- Provide 1 door prize item

Exhibit Times:

Saturday, February 2nd: 9am to 5pm (*Vendor setup will be 8am to 9am*)

Mail your registration form and check to or register online at www.sccaas.org:

SCCAAS
P.O. Box 7774
Columbia, SC 29202

Also consider one of our Sponsorship Opportunities; this is an excellent way for your company to become involved in the conference.

Conference attendees will have many opportunities to visit your booth throughout the day.

We look forward to your company/organization being a part of our conference. **Questions, please contact Brian Day at (c) 803-920-5754.**

Sincerely,

D. Brian Day

D. Brian Day
SCCAAS Secretary

Exhibitor/Vendor Registration Form

South Carolina Council for African American Studies
2019 SCCAAS Conference

SC Department of Archives and History: 8301 Parklane Rd: Columbia, SC 29223
February 2, 2019

[Registration Deadline: January 15, 2019]

Name of Company/Organization:	
Address:	
Reserved by:	Title:
Telephone:	Fax:
Email:	
Web Address:	
Brief description of your business and products or services:	

Do you plan to sell items from your booth? ___yes ___no

Vendor:

Number of Booths: _____ @ \$50 (1 table provided, \$50 for each additional table)

Number of Tables needed: _____

Total = _____

Thank you for your support! Please remit this registration form and payment to:

SCCAAS
P.O. Box 7774
Columbia, SC 29202

Or online at www.sccass.org.

Contact: Brian Day (803) 920-5754

Email: mycouncil@sccaas.org

Website: www.SCCAAS.org

Office Use Only

Date Rec'd _____

Amt Rec'd _____

Check # _____

Amt _____

Confirm mailed _____