

College of Central Florida 37th Annual Early Childhood Conference March 28, 2026 7:15 a.m. to 4 p.m. Vendor Invitation



Dear Valued Colleague:

You are cordially invited to participate in the College of Central Florida 37th Annual Early Childhood Conference on March 28, 2026 at the CF Ewers Century Center, 3001 S.W. College Road, Ocala. The anticipated 400 participants will participate in a dynamic opening and closing session, with approximately 15 breakout workshops during this daylong conference.

The conference will take place at the College of Central Florida, Ewers Century Center, 3001 S.W. College Road, Ocala.

Large vendors such as educational suppliers and curriculum companies, as well as smaller vendors such as childcare centers and individual retailers (e.g., Pampered Chef or Avon), are welcomed.

The fee per table varies, depending upon which floor of the building you choose.

Main Floor \$125 and a \$25 door prize 2nd Floor \$100 and a \$25 door prize 3rd Floor \$75 and a \$25 door prize

We are pleased to provide **ONE** complimentary lunch voucher with each table reservation. Additional lunch vouchers may be purchase for **\$10**. Please **include** this fee with your table reservation.

Proceeds from the vendor booths will be used for Early Childhood Education scholarships. Each vendor is responsible for table coverings and displays. Each table is reserved in the order payment is received. Vendors will receive a confirmation email with details on setup time and procedure.

Please complete the following form and return to Bebe Rahaman along with payment by **Feb. 13, 2026 to reserve your table.** If you have any questions, please call me at 352-854-2322, ext. 1405.

Sincerely,

Bebe Rahaman Teacher Education



College of Central Florida 37th Annual Early Childhood Conference Vendor Form



To reserve a table, mail completed form with payment to:

College of Central Florida, ATTN: Bebe Rahaman – ECE Conference Sponsorship 3001 S.W. College Road, University Center, Room 202, Ocala, FL 34474-4415

Make checks payable to CF; personal checks must include a driver's license number.

Please type or print.					
Business Name:					
Please describe what you will be promoting:					
Contact Name:					
Contact Title:					
Name of Representative Attending:					
Title of Representative Attending:					
Mailing Address:					
Street/P.O. Box	City		State	ZIP Code	
Telephone Numbers:		<u> </u>			
Primary Contact (include area code)		Alternate (in	clude area code)		
Contact Email:					
Representative Email:					
There is a requirement of one door prize worth \$25	per table reserved.	Number	Amount	Total	
Main Floor - \$125/table			X \$125 =		
2 nd Floor - \$100/table			X \$100 =		
3 rd Floor - \$75/table			X \$75 =		
Optional Additional Lunch: \$10 per voucher			X \$10 =		
☐ Electrical Outlet(s)			n/a	n/a	
			Total Due:		
Description of door prize(s), one per table: Pleas	se use the back of t	he form if y	ou need ext	tra space.	
		<u>*</u>			
Special requests or accommodations					
-					
Check Number	Driver's License Nu	ımber			
 -			lude if using a personal	chack	