

# BUSINESS EXPO REGISTRATION FORM



## EVENT INFORMATION:

<b>EVENT TITLE</b>		<b>OPEN &amp; FREE TO THE PUBLIC</b>
Small Business Symposium – Train   Network   Succeed		
<b>EVENT LOCATION NAME</b>		<b>EVENT DATE(S)</b>
Central Mall – Port Arthur		September 18, 2025
<b>EVENT ADDRESS</b>		<b>EVENT MANAGEMENT POINT OF CONTACT EMAIL</b>
3100 FM 365, Port Arthur, TX 77640		Chi: tranct@lamarpa.edu
<b>PHONE</b>	<b>NOTICE</b>	
(409) 984-6531	No second hand items and No Cosmetic items	

## EVENT SCHEDULE

VENDOR MOVE-IN	EVENT HOURS	VENDOR MOVE-OUT
9:00 AM	Opens 10:00 AM – 3:00 PM	4:00 PM

## EVENT DESCRIPTION

- Small Business EXPO is to inspire, empower and excite established small business owners. Business to Business (B2B) networking at it's Best!
- Morning and afternoon training seminars for small business owners (some sessions offered in Spanish & Vietnamese).
- Sell your products & services directly to the public. Opportunity to sell existing inventory and kick start the Holiday shopping season (for the early birds).

## VENDOR SPACE INFORMATION

SIZE OF VENDOR SPACE AND ADDITIONAL ITEM	BASE COST
10 x 10 pipe & drape with power, 2 chairs and 2 lunch tickets	\$ 100.00 each booth For 2 or more booth spaces a \$25.00 discount will be applied

## BASE FEE AND ADDITIONAL ITEM FEE PAYMENT INFORMATION

- Registration Must be Paid in Advance. **(deadline, Monday, September 15 , 2025)**
- Be creative with your booth space to highlight your business.
- OPEN for business at 10:00 AM

## FEE INFORMATION

FEE AMOUNT	MADE PAYABLE TO		
	LSCPA Small Business Development Center		
PAYMENT METHOD	<input type="checkbox"/> CHECK	<input type="checkbox"/> MONEY ORDER	<input type="checkbox"/> CREDIT CARD
TO PAY BY CREDIT CARD	CONTACT PHONE NUMBER		EMAIL TO:
Contact: Chi Tran	(409) 984-6531		tranct@lamarpa.edu

VENDOR INFORMATION

<b>VENDOR NAME</b>		<b>REGISTRATION SUBMISSION DATE</b>
<b>ADDRESS</b>		
<b>PHONE</b>	<b>EMAIL</b>	
<b>WEBSITE</b>		

VENDOR DESCRIPTION

CERTIFICATION

I hereby affirm that all information supplied is true and accurate to the best of my knowledge and belief, and I understand that this information will be considered material in the evaluation of quotations, bids, and proposals. Notice must be given of any change in status impacting the information provided within ten (10) days of said change.

<b>NAME</b>	<b>TITLE</b>
<b>SIGNATURE</b>	<b>DATE</b>

**EMAIL REGISTRATION FORM: [espinaldm@lamarpa.edu](mailto:espinaldm@lamarpa.edu)**