

TOGETHER FOR DOWN SYNDROME

Please join us for the 27th Annual Buddy Walk[®] Information Expo!

On Saturday, October 5th, 2024, Down Syndrome Indiana will be celebrating our 27th annual Buddy Walk[®] in Celebration Plaza of White River State Park. The Buddy Walk[®] was established by the National Down Syndrome Society (NDSS) in 1995 to celebrate acceptance and inclusion of individuals with Down syndrome in their communities. Nationally, Buddy Walk[®] is the most widely recognized public awareness program for the Down syndrome community. Locally, it is currently the largest fundraising and awareness event for Down Syndrome Indiana.

The Buddy Walk[®] will be a unique opportunity for vendors and other not-for-profit organizations to explain the services they provide to our community. The Information Expo will be open from 9:00am to 12:00pm for families and their guests to explore. This year, we are expecting more than 3,000 participants, most of whom will at least walk through the tent once! We ask that vendors, who are not already sponsors, make a \$100 donation to the Buddy Walk[®] general fund in exchange for space in the Information Expo. Not-for-profit organizations with missions directly aligned with that of Down Syndrome Indiana are welcome to exhibit, at a reduced rate of \$50. Tables and chairs will be provided for all exhibitors.

Attached you will find a Contact Information form. If you would like to be a part of the 27th Annual Buddy Walk[®] Information Expo, presented by Down Syndrome Indiana, please return the completed form, with payment, to the Down Syndrome Indiana office so that we can reserve your space and prepare for your needs.

Down Syndrome Indiana c/o Buddy Walk[®] Info Tent 615 N. Alabama Street Ste 205 Indianapolis, IN 46204

If you have any further questions, please feel free to contact the Buddy Walk[®] Coordinator at 317-413-8320 or by email at <u>buddywalk@dsindiana.org</u>.

Warmest regards,

Marni Meunier Buddy Walk Coordinator, Down Syndrome Indiana



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Indy Buddy Walk Information Exhibitor Contact Information

ORGA	ANIZATION	
Organization name:		
Contac	act name and title:	
Phone	e:	Email:
Addres	ess:	
City, st	state, zip code:	
PERSO	ON TO EXHIBIT	
Name	e and title:	
	l:	
*One T	Table (Banquet Table 8' Rectangle) and tw	vo chairs will be provided for each Exhibitor
PAYM	There is \$50 fee to exhibit at the Annual My organizations operates <u>for profit</u> . There is a \$100 fee to exhibit at the Annu Please include payment with your compl Check (Please make check payab	ual Buddy Walk® Information Expo. leted Contact Information Sheet. Thank you. le to Down Syndrome Indiana) / MasterCard / American Express / Other
		Security Code:
	Authorized Signature:	

Please return Contact Information sheet and Payment to: Down Syndrome Indiana c/o Buddy Walk® Mail: 615 N. Alabama St. Suite 205, Indianapolis, In 46204 / Email: buddywalk@dsindiana.org / Fax: 317-925-7619