



January 2025

**WHPE Annual Convention  
October 29-30, 2025  
Kalahari Resort and Convention Center  
Wisconsin Dells, Wisconsin**

Dear Exhibitor:

This year's convention is being held at the Kalahari Resort and Convention Center in Wisconsin Dells, WI. Your choice of booth space will be determined by the date of receipt of the application and full payment. An 8' x 8' draped booth with one table and two chairs costs \$600.00. There will be an additional charge for electricity, extra tables, AV equipment, etc... There may be additional shipping charges assessed by the Kalahari for shipping and storage.

WHPE is offering a **\$100.00 discount** to anyone who registers and pays in full before July 1, 2025. Application and payment must be received by October 1, 2025 to be guaranteed inclusion in the convention program.

The address of the Kalahari Resort and Convention Center is PO Box 590, 1305 Kalahari Dr, Wisconsin Dells, WI 53965. The schedule is as follows: **Exhibitor set-up time is from 4:00 – 7:00 p.m.** on Wednesday, October 29th. The exhibit hours for 2025 will include our **Wednesday night social from 7-9 p.m. and Thursday, October 30th from 9:00 a.m.- 4:00 p.m.** To provide special opportunities for our exhibitors to meet our attendees, we will be hosting our Wednesday night "All Convention Exhibitor and Members Social" in the exhibit hall from 7-9 p.m. We are also planning 2 different snack breaks in the exhibit hall on Thursday to attract participants to your booth.

To make hotel reservations, please call the Kalahari Resort at (877) 253-5466 and state that you are with the **Wisconsin Health & Physical Education 2025 room block**. The reservation deadline is September 29, 2025.

Our exhibitors are an important part of the overall convention experience and we value your support. The WHPE organization looks forward to having you with us in Wisconsin Dells.

Sincerely,

Nicole Popowich, Association Manager

**WISCONSIN HEALTH AND PHYSICAL EDUCATION**

**2025 APPLICATION FOR COMMERCIAL EXHIBIT SPACE  
KALAHARI RESORT & CONVENTION CENTER  
WISCONSIN DELLS, WI  
OCTOBER 29-30, 2025**

Company \_\_\_\_\_  
(Name of Firm)

Address \_\_\_\_\_ Contact Person \_\_\_\_\_  
\_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ E-mail \_\_\_\_\_

Types of Products to Exhibit: \_\_\_\_\_

Name of Representative(s): \_\_\_\_\_  
\_\_\_\_\_

**Number of Booths Reserved: Please circle one**

One booth - **before July 1<sup>st</sup>** \$500 w/o electricity  
One booth - **after July 1<sup>st</sup>** \$600 w/o electricity

**Extra Tables:** \_\_\_\_\_ @ \$25 per table **Electricity:** \_\_\_\_\_ @ \$100.

**Booth preference:** 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_ 3<sup>rd</sup> choice \_\_\_\_\_  
(Booth preference will be determined by the date of receipt of this application and full payment.)

**Exhibit Opportunity:** \_\_\_\_\_ **15 minute demo slot** \_\_\_\_\_ **1 hour presentation slot**  
(If you are interested in presenting at convention, please note your presentation preference)

\_\_\_\_\_  
Date Signature of Applicant Name and Title (Please Print)

Make checks payable to WHPE Mail application and check to: WHPE  
Mitchell Hall  
Total Amount Enclosed: \_\_\_\_\_ 1725 State Street  
La Crosse, WI  
54601

*Please note that exhibitors at our WHPE convention are prohibited from promoting any content-based school fundraising programs, with the exception of the one program that is in direct partnership with WHPE. The contact person and all representatives of your organization understand that it is the responsibility of the exhibitor to carry appropriate insurance to cover loss or damage to their exhibit or products. By signing this contract, you agree to both of these statements above.*