



Georgia Council of the Blind, Inc.

P.O. Box 381

Trion, GA 30753

Georgia Council of the Blind for 70 years, starring in advocacy and support.

Greetings!

We are hoping you can join us as an exhibitor at the 2026 GCB State Convention-Conference. The dates of the convention are October 8, 2026 through October 10, 2026.

Our exhibit hall will be open to the public on Friday, October 9th from 11:00 am to 4:00 pm.

The exhibit hall and meetings are at the hotel. Hotel reservations will be at the • Courtyard by Marriott Atlanta Covington, 11500 Foxfield Way, Covington, Georgia, 30014USA. The price per night is \$129.00 plus tax per room per night. The

deadline to receive this group rate is September 8, 2026. Call +1 470-444-1470, to reserve your room and mention that you are with GCB2026, or click the following link if you are viewing this online:

or booking online at:

https://www.marriott.com/event-reservations/reservation-link.mi?id=1765314733578&key=GRP&app=resvlink&branch_match_id=1443017416466982909&branch_referrer=H4sIAAAAAAAAAA8soKSkottLXTywo0MtNLCrKzC8p0UvOz9UvSi3OyczLtgdK2ALZZSCOWmaKraG5mamxoYm5sbGpuYVadmqlrXtQgFpdUWpaKIB3Xnp8UIF%2BeXFqka1zRIF%2BbioAPukVwmAAAAA%3D

All exhibitors participating in the 2026 GCB State Convention-Conference will be given 3 minutes to showcase their products and services beginning at 9:00 am. Exhibitors will be able to set up from 10:00 am to 11:00 am and breakdown will be from 4:00 pm to 5:00 pm. You are required to indicate whether or not you have an active liability insurance policy. Answer “yes” or “no” on the vendor’s application form.

The exhibitor fees are as follows:

Vender Fee: \$50.00 _____

Half Table Fee: \$25.00 _____

You can register online at <https://georgiacounciloftheblind.org/register>.

For further information:

Jerrie Toney at Email: jerriemt2@gmail.com or call 706.461.1013

Steve Longmire at Email: info@sunbright.biz or call 404.234.5820

We look forward to seeing you in Covington!

GCB 2026 State Convention Committee

2026 GCB State Convention-Conference Exhibitor Registration Form

Name/Organization _____

Address _____

Telephone _____

Contact Person _____

Web site if applicable _____

Does your business/organization have liability insurance? (Check “yes” or “no”)

_____ Yes

_____ No

Vendor Fee \$50.00 _____

Half Table: Fee \$25.00 _____

As per guidelines adopted by the board of directors, by becoming an exhibitor you agree to the following:

- For the exhibit area to be comfortable for all participants, exhibitors must agree to not demonstrate products of any kind with fragrances. Scented products in packaging may be sold.
- The exhibitor application and payment must be submitted in advance to reserve a table.
- Due to hotel regulations, exhibitors must agree to not sell or give away any food items.

Sincerely,

2026 GCB State Conference Convention-Committee