



nebraska  
health care association



nebraska  
assisted living association

advocate. educate. support.

# 2012 SPRING CONVENTION AND TRADE SHOW

## EXHIBIT

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## ADVERTISE

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APRIL 24-26, 2012  
YOUNES CONFERENCE CENTER  
KEARNEY, NEBRASKA

# Trade Show Prospectus

## Exhibitor Benefits

- Two copies of the Spring Convention Book including a current listing of NHCA and NALA member facilities.
- An electronic and printed list of convention attendees.
- A name badge with exhibitor ribbon and complimentary lunch on Tuesday for two.
- Three hours of non-conflicting exhibit time.

## Exhibitor Hours - Tuesday, April 24

**Registration and Move In:** 7:30 am-10:30 am

**Trade Show:** 11:00 am-12:30 pm

**New! Exhibitor Program and Lunch:** 12:30 pm-2:00 pm

Cynthia Morton, Executive Vice President of the National Association for the Support of Long Term Care (NASL), will present federal legislative and regulatory issues affecting nursing home and assisted living vendors. NASL is the leading national organization with exclusive involvement in the legislative and regulatory matters affecting all ancillary services to the long term and post-acute care setting, including therapy, medical products and supplies, diagnostic testing, and information systems.

**Trade Show:** 2:00 pm-3:30 pm

**Move Out:** 3:30 pm-4:30 pm

- Exhibitor registration will be at the exhibitor registration desk located in the pre-function area.
- Exhibit hours reflect non-conflicting education/trade show times; exhibitors are required to be in attendance during these hours.

## Exhibit Booth Specifications

- Premiere Booths are 10' x 12' and include back and side drapes, a one-line identification sign (up to 25 characters), two 6' tables, four chairs, and complimentary Wi-Fi.
- Standard Booths are 10' x 8' and include back and side drapes, a one-line identification sign (up to 25 characters), one 6' table, two chairs, and complimentary Wi-Fi.
- The Younes Conference Center exhibit areas are fully carpeted.
- Electricity is available in all perimeter booths and in close proximity to all other booths. **Exhibitors must provide their own extension cord.** Water and drains are not available. **All arrangements must be made in advance through NHCA.**
- Exhibitors are responsible for renting additional supplies from AAA Party & Event Rental.
- AAA Party & Event Rental exhibitor service kits will be e-mailed prior to the show and will include order forms for additional supplies and shipping information.

## Exhibit Fees

- NHCA/NALA Business Associate Member rate for a Standard Booth is \$550; non-member rate is \$850. Because of limited space, there is no discount for additional standard booths.
- NHCA/NALA Business Associate Member rate for a Premiere Booth is \$925; non-member rate is \$1,225.
- **Booth space is reserved on a first-come, first-serve basis. TO GUARANTEE YOUR RESERVATION, PAYMENT MUST ACCOMPANY THE EXHIBIT AGREEMENT FORM. Space will not be reserved without payment.**
- **No refunds will be issued for cancellations received in the NHCA office after Feb. 24, 2012 (60 days prior to the show).**

- To have your company name listed as an exhibitor in the convention book, reservations and payment must be received by Mar. 26, 2012.
- Only one vendor per booth. If more than one vendor is exhibiting in a booth, each vendor will be charged the booth fee.
- Reservations will be accepted until all space is sold.

## Shipping and Storage of Exhibits

- AAA Party & Event Rental is the official decorator for the trade show; information regarding their services will be e-mailed prior to the show. For questions on shipping and handling, contact AAA Party & Event Rental, 112 East 6th Street, Kearney, NE 68847, 308-243-1015, kelsiej@aaarents-omaha.com.

## Exhibitor Drawings

- Prizes awarded are based on donations provided by exhibitors.
- Exhibitors will need to confirm at check-in if they are participating in the exhibitor drawings.

## Advertising and Sponsorship

- **All ads must be camera-ready and fit the advertisement specifications.** For a nominal fee, NHCA will produce camera-ready advertisements. See enclosed contract for further information.
- **Event sponsorships** are available. Contact Tracy Rathe at TracyR@nehca.org or 402-435-3551 for details.

## Extra Meal Tickets

- If you would like to purchase additional meal tickets or participate in any of the meal functions of the convention, please indicate on agreement. Additional Tuesday lunch tickets are \$19.00.

## Trade Show Exhibits

- The displays represent all aspects of the nursing facility and assisted living professions including suppliers of computers/software, food products, furnishings, cleaning equipment and supplies, draperies and linens, financial services, pharmaceutical products, medical supplies, alarm systems, and consultants.

## Room Rates

Exhibitors will be responsible for their own reservations and sleeping rooms. Room blocks have been set aside for vendors at the Wingate Inn and the Hampton Inn, adjacent to the Younes Conference Center. Please make reservations by Apr. 2 to guarantee NHCA room rates.

### Wingate Inn

**Call 308-237-4400 to make your reservation. Identify yourself as a vendor for the NHCA/NALA trade show.**

1-4 Persons: \$84.95

Suites: \$145.95

### Hampton Inn

**Call 308-234-3400 to make your reservation. Identify yourself as a vendor for the NHCA/NALA trade show.**

1-4 Persons: \$84.95

## NHCA/NALA Contact Information

Tracy Rathe, Director of Member Support, TracyR@nehca.org  
Kate Walker, Member Support Coordinator, KateW@nehca.org  
3900 NW 12th Street, Suite 100  
Lincoln, NE 68521-3037  
Phone 402-435-3551 Fax 402-475-6289

**Tentative Convention Agenda**

**Monday, April 23**

10:00 am-4:00 pm Board Meetings

**Tuesday, April 24**

7:30 am-10:30 am **Exhibitor Registration and Set-Up**  
 8:00 am-5:00 pm Convention Registration Open  
 9:00 am-11:00 am Opening Session and Awards Program  
 11:00 am-12:30 pm **Trade Show Open**  
 11:00 am-12:30 pm Lunch for Convention Registrants  
 12:30 pm-2:00 pm **Exhibitor Program and Lunch**  
 12:30 pm-2:00 pm Convention Education  
 2:00 pm-3:30 pm **Trade Show Open**  
 3:30 pm-4:30 pm **Exhibitor Move-Out**  
 3:30 pm-5:00 pm Education Sessions

**Wednesday, April 25**

7:30 am-5:15 pm Registration Open  
 8:30 am-10:00 am Education Sessions  
 10:00 am-10:30 am Break  
 10:30 am-12:00 pm Education Sessions  
 12:00 pm-1:30 pm Lunch  
 1:30 pm-3:00 pm Education Sessions  
 3:00 pm-3:30 pm Break  
 3:30 pm-5:00 pm Education Sessions  
 5:00 pm-6:00 pm Reception  
 6:00 pm-7:00 pm Dinner

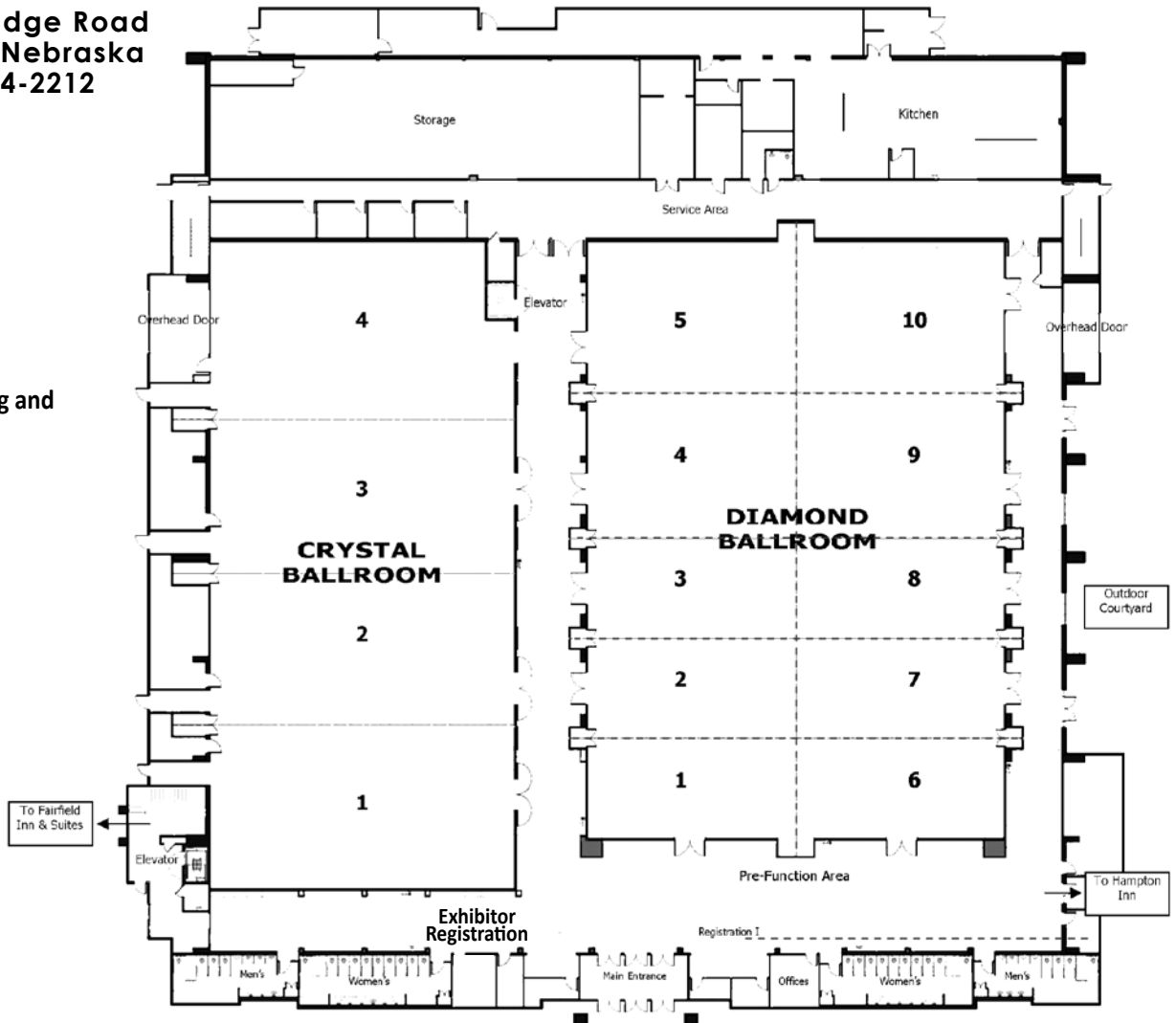
**Thursday, April 26**

7:30 am-9:00 am Registration Open  
 7:30 am-9:00 am Breakfast  
 8:30 am-10:00 am Education Sessions  
 10:00 am-10:30 am Break  
 10:30 am-12:00 pm Education Session  
 12:00 pm Lunch To Go



416 Talmadge Road  
 Kearney, Nebraska  
 308-234-2212

Exhibitor Parking and  
 Move-In



# NHCA/NALA Spring Convention



**CONFERENCE CENTER  
Kearney, Nebraska**

416 Talmadge Road  
Kearney, Nebraska  
308-234-2212

## Exhibit Hours for Tuesday, April 24

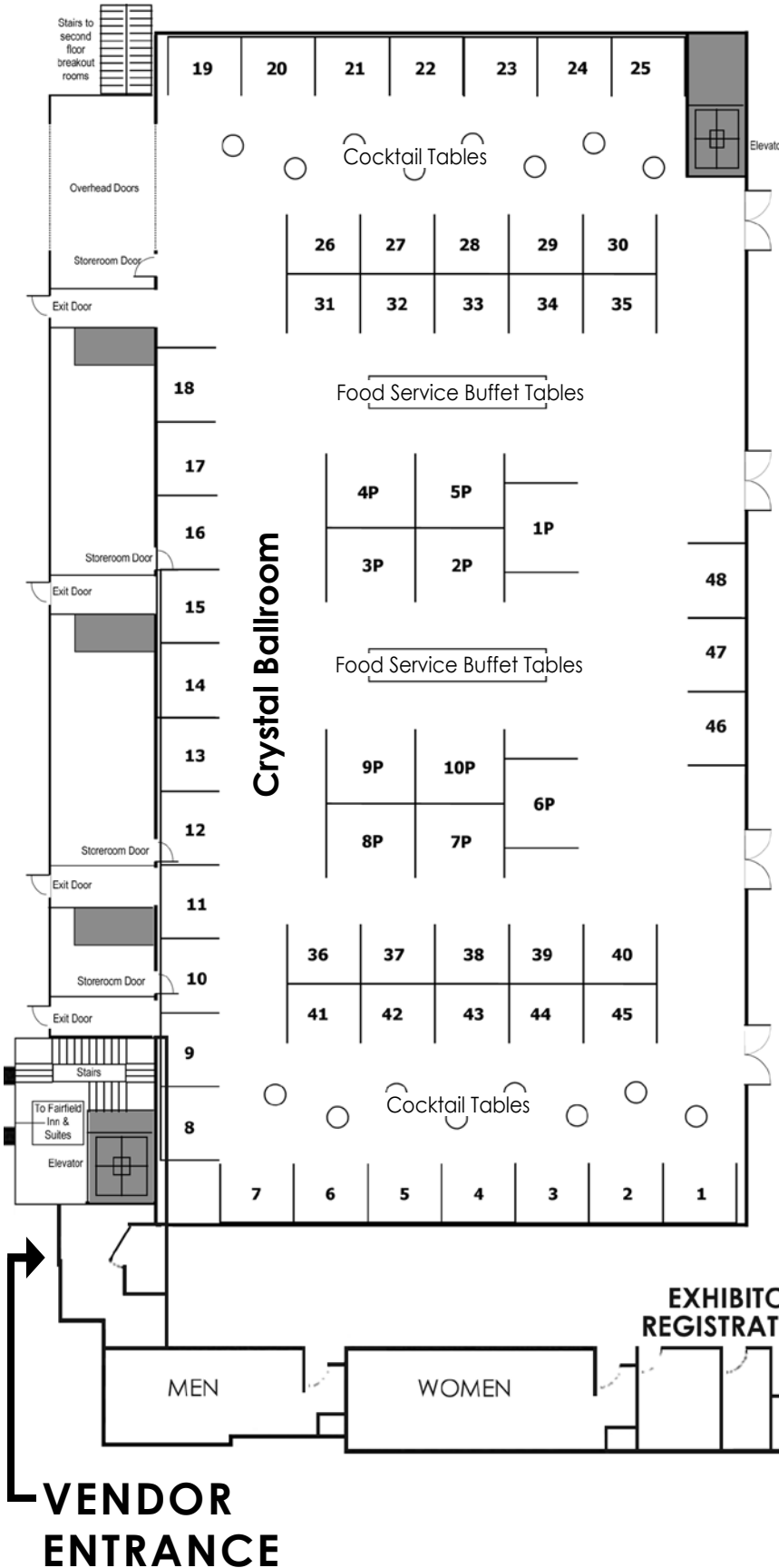
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Trade Show  
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New! Exhibitor Program and Lunch  
12:30 pm - 2:00 pm

Trade Show  
2:00 pm – 3:30 pm

Move Out  
3:30 pm – 4:30 pm



**HAMPTON INN →**

**EXHIBITOR  
REGISTRATION**

**CONVENTION  
REGISTRATION**

**MEN**

**WOMEN**

**MAIN ENTRANCE**

**VENDOR  
ENTRANCE**

## 2012 Spring Convention Exhibit Agreement

The company listed herein hereby authorizes the Nebraska Health Care Association to reserve space at the NHCA/NALA 2012 Spring Convention Trade Show to be held Apr. 24 at the Younes Conference Center in Kearney, Neb. It is understood that all displays are subject to approval by NHCA and that all exhibitors must adhere to the rules and regulations set forth by NHCA and the Younes Conference Center.

### Exhibit Fees - Premiere Booth

Booth Location: Crystal Ballroom	Size: 10' x 12'
<b>Business Associate Member Cost:</b>	\$925
Additional Booths:	\$925
<b>Non-Business Associate Member Cost:</b>	\$1,225
Additional Booths:	\$1,225

### Exhibit Fees - Standard Booth

Booth Location: Crystal Ballroom	Size: 10' x 8'
<b>Business Associate Member Cost:</b>	\$550
Additional Booths:	\$550
<b>Non-Business Associate Member Cost:</b>	\$850
Additional Booths:	\$850

### Booth Space Application and Contract

(please type or print clearly)

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Booth Space Location Request

NHCA will attempt to assign exhibit space in accordance with the choices listed below. **BOOTH SPACE IS GUARANTEED ONLY IF PAYMENT ACCOMPANIES CONTRACT. Booths are assigned on a first-come, first-serve basis.** Booth assignment and confirmation will be made upon receipt of application and payment.

1st Choice: \_\_\_\_\_ 2nd Choice: \_\_\_\_\_ 3rd Choice: \_\_\_\_\_  
(see floor plan)

NHCA will try to assign booth space as requested. If all of your denoted spaces have been previously assigned, NHCA reserves the right to assign space as equitably as possible.

Please indicate if there are companies by which you wish not to be placed in close proximity \_\_\_\_\_

### Exhibit Identification Sign

Sign Should Read: \_\_\_\_\_  
(25 characters or less. Please type or print clearly.)

Do you need electricity?    yes             no

Will you donate a door prize for the exhibitor drawing?    yes             no

*Form continued on the back side*

**Name Badges**

Company representatives who will attend the trade show (for name badges)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Contact Person, Address, and Product/Service statement to be listed in Convention Book**

Must be received by Mar. 26, 2012, to be included in Convention Book.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company Web Site \_\_\_\_\_

Product/Service statement to be listed in Convention Book: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Cancellations and Payment**

If cancellations are required, the information must be submitted in writing to the NHCA office by Feb. 24, 2012. **No refunds will be issued after Feb. 24, 2012 (60 days prior to the show).** Full payment for exhibit space must be received with the exhibit space application. Exhibit space will not be reserved without payment. Make checks payable to Nebraska Health Care Association.

I will be paying by:

CHECK  CREDIT CARD  NAME ON CREDIT CARD: \_\_\_\_\_

**BILLING ADDRESS:** \_\_\_\_\_  
Include Address, City, State, Zip

CREDIT CARD NUMBER: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

\_\_\_\_\_ VISA \_\_\_\_\_ MASTER CARD \_\_\_\_\_ DISCOVER \_\_\_\_\_ AMERICAN EXPRESS

Your signature will authorize this transaction. If you have questions, please call the NHCA office at 402-435-3551.

**SIGNATURE:** \_\_\_\_\_

**FEES**

Exhibit Space Fee	\$550.00—\$1,225.00	\$ _____
Extra Exhibit Space	\$550.00—\$1,225.00	\$ _____
Advertising Fee	\$35.00—\$275.00	\$ _____
Extra Meal Tickets	____ Lunch \$19.00 ea.	\$ _____

Federal Tax ID# 47-0488922

**TOTAL PAYMENT DUE** \$ \_\_\_\_\_

# 2012 Spring Convention Advertising Agreement - Convention Book

The Nebraska Health Care Association offers advertising in its Convention Book which will be distributed to convention attendees. Ad rates have been set to make it most affordable to put your name in front of the members. Ads will be accepted for:

- the front inside cover
- inside and backside of the back cover
- four divider pages (one side only)
- inside pages

**The ads must be camera-ready, black and white, and the appropriate size.** Enclose camera-ready copy or indicate how copy is to appear. **If ads are not camera-ready, a set-up fee of \$35.00 will be charged for time and materials.** Lettering can be set for this cost, but please enclose originals of artwork, logos, letterheads,

photographs, etc.

A hard copy of the ad, at the appropriate size, may be mailed or sent on a disk or e-mailed to TracyR@nehca.org. Please use a .pdf, .jpg, or .tif format.

**Ad copy and contract must be received by Mar. 26, 2012. Full payment must accompany the contract.** Ads received after this date will not appear in the Convention Book. Make checks payable to Nebraska Health Care Association.

Ad Choices:	Qty	Commercial	Member Facilities	Business Associate Member
Back Cover	<input type="checkbox"/>	\$275.00	\$250.00	\$225.00
Inside Back Cover	<input type="checkbox"/>	\$225.00	\$200.00	\$175.00
Inside Front Cover	<input type="checkbox"/>	\$225.00	\$200.00	\$175.00
Divider Page	<input type="checkbox"/>	\$200.00	\$175.00	\$150.00
Double Page	<input type="checkbox"/>	\$200.00	\$175.00	\$130.00
Full Page	<input type="checkbox"/>	\$125.00	\$100.00	\$ 75.00
Half Page	<input type="checkbox"/>	\$75.00	\$ 60.00	\$ 50.00
Quarter Page	<input type="checkbox"/>	\$60.00	\$ 50.00	\$ 35.00

All advertising is subject to approval by NHCA. **Please type or print clearly**

NAME OF ADVERTISER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_ FAX \_\_\_\_\_

**I will be paying by:**

**CHECK** \_\_\_\_\_ **CREDIT CARD** \_\_\_\_\_ NAME ON CREDIT CARD \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

\_\_\_\_\_ VISA \_\_\_\_\_ MASTER CARD \_\_\_\_\_ DISCOVER \_\_\_\_\_ AMERICAN EXPRESS

Your signature will authorize this transaction. If you have questions, please call the NHCA office at 402-435-3551.

**SIGNATURE:** \_\_\_\_\_

Complete and return to:  
 Nebraska Health Care Association  
 3900 NW 12th Street, Ste 100  
 Lincoln, NE 68521-3037  
 Phone 402-435-3551  
 Fax 402-475-6289  
 E-mail TracyR@nehca.org

For Office Use	
Ad Received	<input type="checkbox"/>
Ad on file	<input type="checkbox"/>
Payment Received	<input type="checkbox"/>

Quarter Page - Thin line to top line - 7 1/4" x 2 1/4"

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Half Page - Dotted line to top line - 7 1/4" x 4 1/2"

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Full Page - Bottom line to top line - 7 1/4" x 9 1/2"