

**PART 1: Select Type of Exhibitor Package**

**TO EXHIBIT:**

Please complete and return this form and payment to NEAHMA. **Payment must be received before booth space is assigned.**

**RETURN FORM AND PAYMENT TO:**

NEAHMA  
 400 Washington Street, #201  
 Braintree, MA 02184  
 Phone: 781.380.4344  
 Fax: 781.380.4842  
 Email: [Sarah.Kaufmann@neahma.org](mailto:Sarah.Kaufmann@neahma.org)

**IMPORTANT INFORMATION/DETAILS ON ALL BOOTH PACKAGES:**

All booth packages include name badges for two exhibitors, listing in conference program book, buffet lunch for two exhibitors and one year NEAHMA Membership. Trade booth space is: one 6' foot table, two chairs and white table linen. Booth signage and decoration maximum is 8' feet tall. (Additional badges can be purchased for \$65).

Please check the Exhibitor Trade Show Package you would like to participate in. If you choose Level 2, you may want to consider upgrading to 2A, Silver Level or 2B, or Gold Level for a better value and maximum exposure.

Membership for this Trade Show is from **October 2015-September 2016**

Booth Selection paperwork will be emailed after payment is received. Booths are first come, first serve. Trade Show confirmation packets will be emailed two weeks before the Trade Show.

**ARTWORK REQUIREMENTS:**

Logos must be in a PDF, Jpeg or Tiff Format and sent to: NEAHMA, [Sarah.Kaufmann@neahma.org](mailto:Sarah.Kaufmann@neahma.org) Please see sponsorship/advertising form on back for ad dimensions.

**ARTWORK DEADLINE:**

September 25, 2015

\_\_\_\_\_ Exhibitor Showcase: \$650

\_\_\_\_\_ 2 Booths for Extra Space: \$1,300

\_\_\_\_\_ Exhibitor Showcase & Dinner Reception: \$750

\_\_\_\_\_ Exhibitor Showcase Silver Level Sponsor: \$1,000

Four dinner tickets including two drink tickets per person  
 Half Page ad in conference program book  
 Company logo prominently displayed during reception  
 Silver Sponsor identification at booth

\_\_\_\_\_ Exhibitor Showcase Gold Level Sponsor: \$1,200

Six dinner tickets including two drink tickets per person  
 Full page ad in conference program book  
 Company logo prominently displayed during reception  
 Company logo on signage throughout conference  
 Logo on table tents on every table during reception  
 Company logo displayed in conference breakout workshops  
 On Camera Interview  
 Private cocktail VIP reception with the decision making senior level people from NEAHMA's Members  
 Board Member Ambassador to introduce your company during conference & reception

**PART 2: Additional Costs**

Please check the electrical items you need for your booth:

Standard 110 watt outlet (Two Plug) \$45.00 \_\_\_\_\_  
 Power strip \$10.00 \_\_\_\_\_  
 Extension cord \$ 5.00 \_\_\_\_\_  
 None of the Above \_\_\_\_\_

Additional Name Badges \$65

Qty: \_\_\_\_\_ Total Cost: \_\_\_\_\_

**PART 3: Exhibitor Contact Information**

\_\_\_\_\_  
 Company Name Is Your Business a MBE or WBE If so, please circle.

\_\_\_\_\_  
 Type of Business

\_\_\_\_\_  
 Address

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

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

\_\_\_\_\_  
 Website

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

\_\_\_\_\_  
 Email Address

\_\_\_\_\_  
 Please describe booth display i.e. table top display only, 8" backdrop signage, etc.

**PART 4: Payment Information**

Enclosed is my check made payable to NEAHMA: \_\_\_\_\_

Please charge my credit card (**check off type of card**) Visa \_\_\_\_\_ Discover \_\_\_\_\_ Amex \_\_\_\_\_ MasterCard \_\_\_\_\_

NEAHMA, 400 Washington Street, #201  
 Braintree, MA 02184

Exhibitor Package Total \_\_\_\_\_ Additional Name Badge Total \_\_\_\_\_ Electrical Total \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

\_\_\_\_\_  
 Card Number Exp Date

\_\_\_\_\_  
 Name on Card Signature

\_\_\_\_\_  
 Billing Address if Different From Above

**PART 1: Select Sponsorship Package**

**\$3,000 Conference Tote Bag Sponsor *SOLD***

- Tote bags will be distributed to every attendee with program book
- Full page ad in the conference program book
- Exhibitor booth & one year membership

**\$3,000 Conference Lunch Sponsor \_\_\_\_\_**

- Recognition at sponsored lunch
- Logo on 2 10' screens during lunch
- Full page ad in conference program book
- Exhibitor booth & one year membership
- 3 minute on camera interview

**\$2,500 Exclusive Note Pad Sponsor \_\_\_\_\_**

- Notepads will display your company logo
- 1/2 page ad in the conference program book
- Exhibitor booth & one year membership

**\$2,000 Exclusive Name Badge Lanyard Sponsor *SOLD***

- Name badge lanyards will display your company logo
- 1/2 page ad in the conference program book
- Exhibitor booth & one year membership

**\$1,500 Conference Program Book Sponsor \_\_\_\_\_**

- Logo printed on cover of conference program book
- Every attendee receives in conference tote bag
- Full page ad in the conference program book

**\$750 Video and Social Media Package Sponsor \_\_\_\_\_**

- Logo on video backdrop
- Logo features in all videos recorded and photos in front of backdrop
- 3 minute on camera interview
- Original file to use in your marketing

**\$650 Coffee Break Sponsor**

- Signage at sponsored workshop
- Business card advertisement in conference program book

**\$650 Exclusive Breakfast Sponsor *SOLD***

- Signage at workshops and main hallway by entrance
- Business card advertisement in conference program book

**\$500 Friend of NEAHMA \_\_\_\_\_**

- Company logo in conference program book

**PART 2: Select Advertising Opportunity**

**Advertising Opportunities in Program Book**

- Full Page Ad, Full Color, 8.5h x 11w: \$250 \_\_\_\_\_
- 1/2 Page Ad, Full Color, 5.5 h x 8 w : \$125 \_\_\_\_\_
- Business Card Ad, Full Color, 3.5 h x 2 w: \$50 \_\_\_\_\_

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**Email to Sarah.Kaufmann@neahma.org** by September 25, 2015

**PART 3: Payment Information**

Enclosed is my check made payable to NEAHMA: \_\_\_\_\_  
 Please charge my credit card (**check off type of card**) Visa \_\_\_\_\_ Discover \_\_\_\_\_ Amex \_\_\_\_\_ MasterCard \_\_\_\_\_

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Exhibitor Package Total \_\_\_\_\_ Additional Name Badge Total \_\_\_\_\_ Electrical Total \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address \_\_\_\_\_