

EXHIBITOR AND SPONSOR INFORMATION

2020

Rural Health and Hospitals Conference



c|h|a

Colorado Hospital
Association



March 4 – 6, 2020

Denver Marriott West
Golden, CO



c|h|a *education*

Invitation

Colorado Hospital Association (CHA) is providing exhibiting and sponsorship opportunities for the 2020 CHA Rural Health and Hospitals Conference scheduled for March 4-6, 2020 at the Denver Marriott West in Golden, Colorado. This meeting is Colorado’s premier gathering of rural hospital leaders and decision makers.

Exhibition

Put your company’s name at the forefront of attendee’s minds with CHA event exhibiting and sponsorship opportunities. Build name recognition and drive traffic to your exhibit space with high-profile promotional opportunities that target this lucrative market.

To maximize traffic and exposure for all exhibitors, specific times are established for participants to visit the exhibit hall. No conflicting meetings are scheduled during these hours. (See the In Conjunction With section.)

Exhibitors and sponsors are encouraged to attend the CHA educational sessions and networking events.

Location & Attendance

The exhibit hall will be located in the Grand Ballroom of the Denver Marriott West. Exhibitors and sponsors are invited to attend all the education sessions and networking events enabling participants, exhibitors and sponsors opportunities for formal and informal interaction.

Mobile App

Exhibitors and sponsors will have access to the mobile app for the Rural Health and Hospitals Conference. The mobile app provides increased exposure for exhibitors and sponsors and the opportunity to connect with attendees.

Exhibitor and Sponsor Packages

EXHIBITOR PACKAGE\$1,850

- 6-foot, skirted display table and one chair (*materials must fit on display table and not block neighboring displays*)
- Logo recognition on conference signage
- Logo recognition on the conference mobile app
- One complimentary conference registration, including all meals, breaks, educational sessions and networking events (*Discounted price of \$175 for additional exhibitor representatives. Maximum of two additional representatives.*)

SPONSORSHIP PACKAGES

Are you thinking of upgrading your support of the Rural Health and Hospitals Conference? Consider adding one or multiple events:

- Opening reception in the Exhibit Hall\$2,250
Wednesday, March 4
- Breakfast\$1,650
Thursday, March 5
- Evening reception in the Exhibit Hall\$2,250
Thursday, March 5
- Breakfast\$1,650
Friday, March 6
- Coffee Sleeve\$3,500
Wednesday, March 4 - Friday, March 6
- **New** Hotel Key Card\$3,500
Wednesday, March 4 - Friday, March 6

Each sponsorship package includes:

- Logo recognition with special signage for the event
- Logo recognition on the conference mobile app
- *One complimentary conference registration, including all meals, breaks, educational sessions and networking events (Discounted price of \$175 for additional exhibitor representatives. Maximum of two additional representatives.)*

Exhibit Hall Schedule

CHECK-IN AND SETUP HOURS:

- Wednesday, March 4: 10 a.m. – 12 p.m.
All Exhibitors/Sponsors must check in at the CHA registration desk prior to setting up. Displays must be set up by 12 p.m. on Wednesday, March 4. Contact Valerie Siebert-Thomas, CHA education manager, at valerie.siebertthomas@cha.com if you need to make special arrangements.

EXHIBIT HOURS:

- Wednesday, March 4
Refreshment Break: 1:30 – 2 p.m.
Refreshment Break: 3:15 – 3:45 p.m.
Opening reception: 4:45 – 6 p.m.
- Thursday, March 5
Coffee Break: 9 – 9:30 a.m.
Coffee Break: 10:30 – 11 a.m.
Lunch: 12 – 1:30 p.m.
Refreshment Break: 2:45 – 3:15 p.m.
Reception: 4 – 5:30 p.m.

DISMANTLING:

- Thursday, March 5: 5:30 – 6:30 p.m.

Display Specifications & Payment

Display tables will be located in the general session meeting room. Displays must not block the visibility of neighboring exhibits and must not exceed the dimensions of the table.

Full payment is required with exhibit/sponsor signed contract. Indicate three table location preferences according to the enclosed floor plan. Tables are assigned on a first-come, first-served basis.

CHA accepts checks, VISA, MasterCard and American Express. Please provide appropriate contact and billing information with your payment and contract. If a check payment is accompanying your contract, make the check out to CHA and mail along with the contract to the address listed below.

Colorado Hospital Association
Attention: Education Manager
7335 E. Orchard Rd.
Greenwood Village, CO 80111

Exhibit Representatives

The exhibit fee includes complimentary registration for one representative from your company. Exhibitors and sponsors are invited to attend all education sessions and networking events. Additional representatives may register for a discounted price of \$175 each (maximum of two additional representatives). A registration form to register representatives will be provided with your confirmation packet. Submit one completed registration form for each representative and return to CHA by **Monday, Feb. 3.**

Early Breakdown and Dismantling

Displays must remain intact until after the reception at 5:30 p.m. on Thursday, March 5. Displays cannot be dismantled or removed earlier.

Please note: CHA and Denver Marriott West are not responsible for displays left in the exhibit hall past 6:30 p.m. on Thursday, March 5.

Electrical

If you need electrical power, please contact Valerie Siebert-Thomas, CHA education manager, at valerie.siebertthomas@cha.com or 720.330.6024. Charges for electrical will be at your expense.

Display Sharing

Companies wishing to share a table must have a formal contractual arrangement with one another. CHA must be notified in writing of the request to share a table at the time a contract is submitted. The contract must include both companies' information, including name and relationship and the reason for sharing space. You will be notified by CHA if your request is approved.

Subletting of Space

Exhibitors may not assign, sublet or apportion to others whole or any part of the space allocated, and may not advertise or display goods or services other than those manufactured or sold by them in the regular course of their business. An exhibitor may use equipment or the product of another exhibitor for the purpose of better product presentation of their own product but may not give credit to the manufacturer.

EXHIBITOR AND SPONSOR INFORMATION

Shipping

If you will be shipping items to and from the hotel, you may incur a handling fee for all incoming and outgoing boxes. Charges for shipments will be at your own expense. Please contact Valerie Siebert-Thomas, CHA education manager, at valerie.siebertthomas@cha.com or 720.330.6024 for more information.

Security

There will be no security during the conference. If you are planning on bringing a laptop computer or any other valuables, you are responsible for them. Neither CHA nor the hotel will be held liable for any losses. Please safeguard all show goods, materials, equipment and display.

Liability

CHA is not liable for materials during setup, exhibit hours or dismantling. The general sessions and exhibit hall are located in the Grand Ballroom.

Cancellations

If an exhibitor/sponsor cancels prior to **Wednesday, Feb. 5** and the display can be resold, a full refund will be made. If it is not resold, a \$375 processing fee will be charged. If cancellation is made after **Wednesday, Feb. 5**, the full display fee will be charged. All notices of cancellation must be received in writing.

In Conjunction with Meetings

All meetings, events and/or activities held in conjunction with the 2020 CHA Rural Health and Hospitals Conference by sponsoring companies and related organizations, whether at Denver Marriott West or at outside venues, must be approved by CHA. To receive approval, please contact Valerie Siebert-Thomas, CHA education manager, at valerie.siebertthomas@cha.com. "In Conjunction With" events are functions that include the CHA participants but are not planned or sponsored by CHA.

Hotel Information

CHA has secured a special discounted rate at the Denver Marriott West of \$142 per night. The deadline for the discounted rate is **Monday, Feb. 17**. In order to receive the discounted rate for CHA attendees, reservations may be made by calling 888.238.1803 and asking for the CHA 2020 conference room rate.

For questions about registration or hotel reservations, contact Valerie Siebert-Thomas, CHA education manager, at valerie.siebertthomas@cha.com or 720.330.6024.

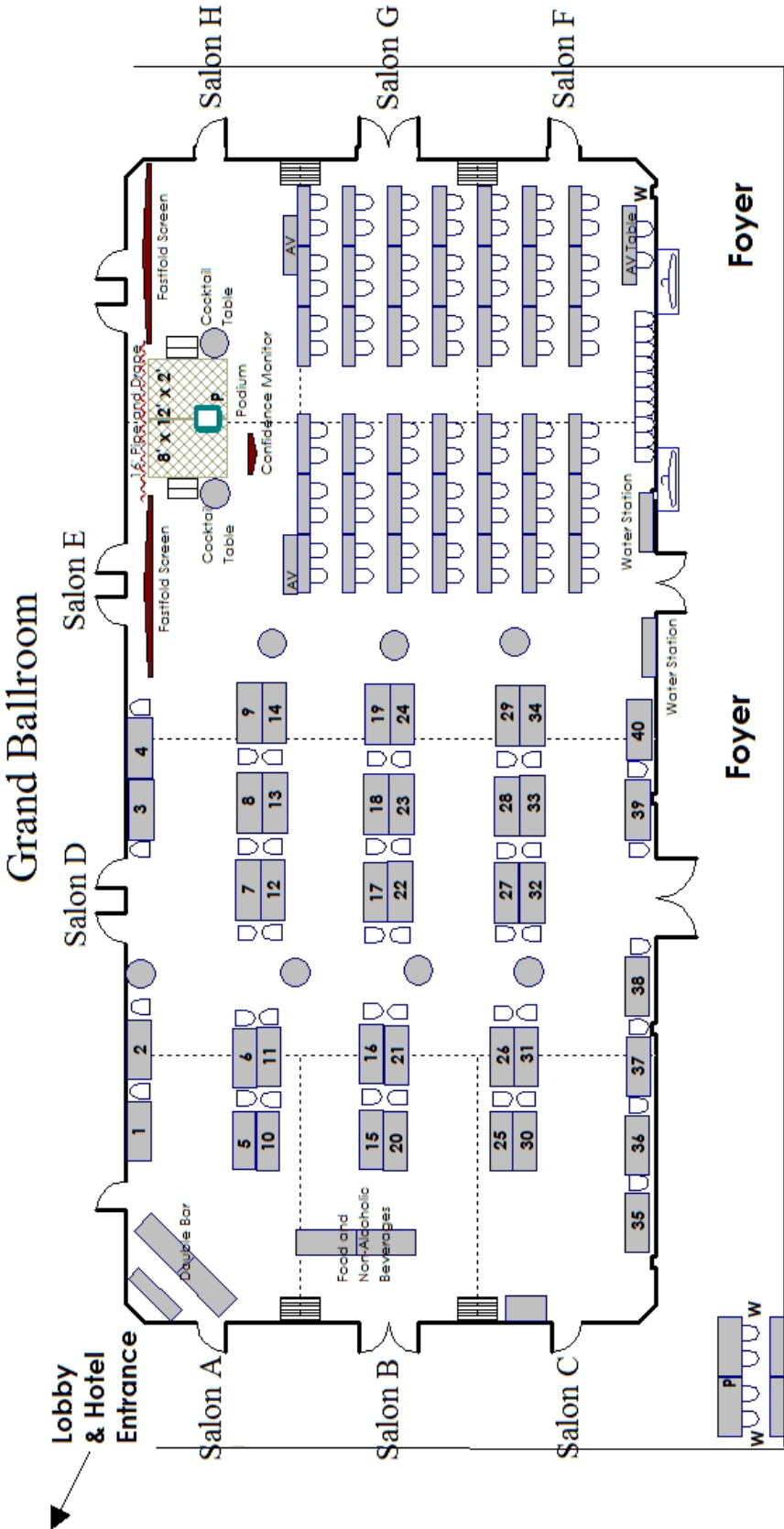
CHA Associate Membership

Full payment and active associate membership status is required with signed Exhibitor/Sponsor contract. No booth or sponsorship can be reserved without the signed contract and full payment.

Inquiries

Valerie Siebert-Thomas
Education Manager
valerie.siebertthomas@cha.com
720.330.6024

Peggy McCreary
Meeting and Events Coordinator
peggy.mccreary@cha.com
720.330.6034



2020

Rural Health and Hospitals Conference

March 4-6, 2020 | Denver Marriott West | Golden, Colorado**INSTRUCTIONS:** Complete this form with your company information as you want it to appear in all conference materials.**COMPANY INFORMATION**

Company Name _____

Company Address _____

City _____ State _____ Zip _____

Telephone _____

Website _____ Twitter Handle @ _____

Primary Business Product/Service _____

Main Competitor(s) _____

Company Description: *(To be used on the mobile app.)* Please print or type using 25 words or less.

_____**PRIMARY CONTACT INFORMATION**

Primary Contact Name _____

Title _____

Telephone _____ Email _____

RURAL HEALTH AND HOSPITALS CONFERENCE EXHIBITOR AND SPONSORSHIP OPPORTUNITIES - ASSOCIATE MEMBERSHIP REQUIRED**ASSOCIATE MEMBERSHIP FEES**

Associate Membership	Calendar Year	Fee
2020 Associate Membership	Jan. - Dec.	\$1,000

Payment required for all exhibitors and sponsors that have not already paid*RURAL EXHIBITOR FEES**

Exhibitor Package	Table Location	Fee
6-Foot Display Tables	1-40 (see floorplan on page four)	\$1,850

Preferred Table Displays: Indicate three table location preferences according to the enclosed floor plan. Tables are assigned on a first come, first-served basis.

Preferred Display Tables: _____
(1) (2) (3)**NOTE:** Selection does not guarantee availability. Booths are limited and are offered on a first-come, first-served basis based on date both contract and payment are received.

EXHIBITOR AND SPONSOR CONTRACT

RURAL SPONSORSHIP FEES

Sponsorship Packages	Dates	Fee
Coffee Sleeve	Wednesday, March 4-Friday, March 6	\$3,500
New Hotel Key Card	Wednesday, March 4-Friday, March 6	\$3,500
Opening Reception	Thursday March 4	\$2,250
Breakfast	Thursday, March 5	\$1,650
Evening Reception	Thursday, March 5	\$2,250
Breakfast	Friday, March 6	\$1,650

NOTE: Selection does not guarantee availability. Sponsorships are limited and are offered on a first-come, first-served basis based on date both contract and payment are received.

CANCELLATION POLICY: If an exhibitor/sponsor cancels prior to **Wednesday, Feb. 5** and the display/sponsorship can be resold, a full refund will be made. If it is not resold, a \$375 processing fee will be charged. If cancellation is made after **Wednesday, Feb. 5**, the full display/sponsorship fee will be charged. All notices of cancellation must be received in writing on or before the date specified.

We hereby agree to exhibit and/or sponsor at the 2020 CHA Rural Health and Hospitals Conference, according to the terms and conditions outlined on the previous pages of the CHA Exhibitor and Sponsor Packet.

Signature _____ Date _____

PAYMENT: Your exhibitor/sponsorship payment is due in full on or before **Friday, Jan. 24, 2020**.

	Fee	Paid
2020 Associate Membership <i>*Payment required for all exhibitors and sponsors that have not already paid</i>	\$1,000	
Exhibitor Package	\$1,850	
Sponsorship Package - Coffee Sleeve	\$3,500	
Sponsorship Package - Hotel Key Card	\$3,500	
Sponsorship Package - Breakfast	\$1,650	
Sponsorship Package - Reception	\$2,250	
Total Amount Paid		\$

PAYMENT OPTIONS: ☐ Check ☐ Credit Card (VISA, MASTERCARD, AMERICAN EXPRESS ONLY)

CHECKS PAYABLE TO: Colorado Hospital Association, Attn: Education Manager, 7335 E. Orchard Road, Greenwood Village, CO 80111

CREDIT CARD INFORMATION: Card Number _____

Expiration Date _____ CVV Code _____

Full Name on Card _____

Please email the completed contract to valerie.siebertthomas@cha.com by **Friday, Jan. 24, 2020**.

