

# Updates in Correctional Health Care

**April 24 - 27, 2010**

Nashville Convention Center | Nashville, Tennessee



## Exhibitor Registration Forms

Complete and return all enclosed forms to:  
Kim Simoni, Exhibits & Sales Manager  
Email: [kimsimoni@ncchc.org](mailto:kimsimoni@ncchc.org) or Fax: (773) 880-2424  
Be sure to review deadlines on each form.

Questions? Call Kim at (773)880-1460, ext. 298.

## **Exhibit Personnel Registration**

**Return this form by Monday, March 22!**

Registration badges are required for entrance to the exhibit hall. Pre-conference sessions are not included.

**EXHIBITING COMPANY NAME:** \_\_\_\_\_ **Booth #:** \_\_\_\_\_

**Two (2) Complimentary Full Conference Registrations per 10' x 10' Booth:**

1. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

2. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

**Full Conference Registrations \$165 each:** Up to five (5) additional "Exhibitor" registrations may be purchased per company. Please complete as you want the name, city, and state to appear on badge. If attendee mailing address is different than corporate, please list individual's preferred address.

1. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

2. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

3. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

4. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

5. **Name:** \_\_\_\_\_ Degree (MD, RN, etc): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

**Payment Information**

Additional paid registrations to be billed on **Visa / MasterCard / AMEX** for **\$ 165.00 per registration (5 maximum)**

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**RETURN FORM by March 22 TO:**  
**Kim Simoni, NCCHC, 1145 W. Diversey Pkwy., Chicago, IL 60614**  
**EMAIL: [kimsimoni@ncchc.org](mailto:kimsimoni@ncchc.org) or FAX (773) 880-2424**

## **Exhibitor Final Program Information**

**Return this form by Monday, March 22!**

### **COMPANY INFORMATION**

List the following information which will be included in the conference program. Please indicate changes as necessary and include customer service phone numbers, if appropriate.

Customers Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Customer service phone number: \_\_\_\_\_

Company/Organization Web site: \_\_\_\_\_

Company/Organization email: \_\_\_\_\_

### **PRODUCT/SERVICE DESCRIPTION**

A short product/service description will be included in the Updates Conference Program. In the space provided below (or on an attached page) please write your description (approximately 50-75 words).

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

### **ADVERTISING & SPONSORSHIP OPPORTUNITIES**

Increase your exposure to Updates Conference attendees through advertising and sponsorship opportunities. Advertising is available in the Conference Program and *CorrectCare™*, NCCHC's quarterly magazine. We can help you design an advertising campaign to reach thousands of correctional health care providers throughout the year!

Looking to maximize your presence during the conference? We will tailor sponsorship opportunities just for you. Show attendees you support them while improving their conference experience!

***I want to know more!***

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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If form is not received at NCCHC office by March 22, information on file will be used.  
This is a hard deadline for Final Program listing.

## **Raffle Board Participation Form**

**Please return form by Friday, March 22!**

Up the ante!! Stand out by taking part in the **Exhibit Hall Raffle Board**. This popular event not only increases traffic in the hall, it also brings more potential customers to your booth!

*Past prizes from exhibitors have included items such as golf clubs, gift baskets packed with local goods, iPods, televisions, DVD players, company merchandise and logo-wear.*

The Raffle Board and drum is located in the Exhibit Hall Lounge. NCCHC will draw the names of winners from the drum during exhibit hall hours (see times below). The winner's name is written on the Raffle Board and the winner must locate their name, find *your* booth number, and **visit your booth to claim the prize**. However, the winner need not be present to win. Once the winning name is drawn, NCCHC will give you their contact information for follow-up.

*Exhibitors are free to hold your own raffle at your booth, but NCCHC will not be announcing your winners.*

There are a limited number of spaces on the NCCHC Raffle Board, so all exhibiting companies wishing to participate in the raffle **MUST** complete this form and submit it by **Friday, March 22!** No prizes will be accepted on site for participation in the NCCHC drawings.

Company: \_\_\_\_\_ Booth # \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Prize(s) to be awarded: \_\_\_\_\_

**Please check which raffle you would like to participate in:**

- Monday, April 26, 12:30 pm**
- Tuesday, April 27, 11:30 am**

Any special instructions?

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EMAIL: [kimsimoni@ncchc.org](mailto:kimsimoni@ncchc.org) or FAX (773) 880-2424

**Registration Bag Inserts**  
Please return form by Friday, March 22!

All NCCHC attendees are welcomed at registration with the ever-popular NCCHC Conference Tote Bag. The Bag includes the Final Program and all pertinent conference materials.

As an exhibitor, your company has the exclusive opportunity to include a give-away in the Conference Tote Bag. It's yet another opportunity to increase your company's exposure on show site. Items are inserted **free of charge!**

Below is a list of suggested inserted items. Please keep in mind the item for inclusion should be something of use to the attendee while at the Conference and back in their offices all year-round. Literature, brochures, surveys, etc., will not be accepted as inserts and should be distributed from your booth.

*Please complete and return this form by Friday, March 22 to let us know what you would like to contribute.*

Provide enough materials for 1,000 registration bags. Any unused materials will be returned to your booth on-site. Shipping information will be provided once this form has been received. **Due to limited space, items will be accepted on a first-in priority basis by submitting this form!**

- |  |   |
|--|---|
| <input type="checkbox"/> Pen   | <input type="checkbox"/> Business Card Holder |
| <input type="checkbox"/> 8.5" x 11" pad of ruled paper - <i>Most requested by attendees!</i> | <input type="checkbox"/> Travel First Aid Kit |
| <input type="checkbox"/> Small Pad of Paper  | <input type="checkbox"/> Penlight             |
| <input type="checkbox"/> Toothbrush and/or Toothpaste  | <input type="checkbox"/> PC Flash drive       |
| <input type="checkbox"/> Highlighter   | <input type="checkbox"/> Phone Card           |
| <input type="checkbox"/> Travel Umbrella   | <input type="checkbox"/> Other : _____        |
| <input type="checkbox"/> Anti-bacterial Hand Sanitizer                                       | _____   |

**YES!** We would like to supply the item(s) listed above for the conference registration bags. Please send me shipping information.

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

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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## **IMPORTANT EXHIBITING INFORMATION**

- All exhibit booth set-up and move-in activities must be completed by 2:00 pm on Sunday, April 25. All boxes and crates must be removed from the floor at that time.
- The ***Exhibit Hall Opening Reception*** will take place Sunday, April 25 from 4:30 pm – 6:00 pm. This event is **mandatory** for all exhibiting companies. Please pass along this information to registered representatives to ensure they make travel arrangements in compliance with show hours.
- Failure to set up your booth or properly staff your exhibit space during the exhibition may require NCCHC to reassign your booth space without notice.
- Displays are expected to remain assembled throughout the duration of the meeting and may be dismantled after 12:15 pm on Tuesday, April 27 when the exhibition closes.
- Dismantling your booth prior to 12:15 pm on Tuesday April 27 could result in a fine of up to \$500.00.
- No hospitality rooms or private parties for conference participants may be held during conference activities and hours. NCCHC must be notified prior to the Conference and will approve such events. Contact Kim Simoni at [kimsimoni@ncchc.org](mailto:kimsimoni@ncchc.org) with details.

For a complete list of NCCHC exhibitor rules and regulations, please reference the Exhibitor Prospectus. Contact Kim Simoni, Exhibits & Sales Manager at (773) 880-1460, ext. 298 with any questions.

We look forward to your participation and cooperation for a successful event!

## Contact Information List

If you have any questions that need immediate attention please refer to the following:

### **Exhibits, Conference Information, and Advertising**

Kim Simoni  
Exhibits & Sales Manager  
(773) 880-1460 ext. 298  
[kimsimoni@ncchc.org](mailto:kimsimoni@ncchc.org)

### **Education, Conference, and Sponsorship**

Deborah Ross  
Director of Education & Meetings  
(773) 880-1460 ext. 286  
[deborahross@ncchc.org](mailto:deborahross@ncchc.org)

### **Decorating Services**

Erin Brady or Leigh Everett  
Paramount Convention Services, Inc.  
5015 Fyler Avenue  
St. Louis, MO 63139  
(314) 621-6677 Fax (314) 621-6416  
[ebrady@paramountcs.com](mailto:ebrady@paramountcs.com) [leverett@paramountcs.com](mailto:leverett@paramountcs.com)  
[www.paramountcs.com](http://www.paramountcs.com)

### **Transportation/Shipping Services**

Yellow/Roadway Corp. (YRC)  
Martin Compton  
[Martin.Compton@yrcw.com](mailto:Martin.Compton@yrcw.com)  
Phone: (800) 610-6500

### **Hotel Accommodations**

Renaissance Nashville  
611 Commerce Street  
Nashville, TN 37203  
Reservations #: (800) 327-6618  
**Meeting Code: NCCHC**  
Room Rate: \$165 single/double