2016 TxANA Annual Convention & Trade Show
Exhibit Rate Sheet

The Texas Association of Nurse Anesthetists, Inc., (a 501(c) 6 Texas Corporation) will host its 2016 TxANA Annual Convention and Trade Show in Houston, TX at the Westin Galleria at the Houston Galleria! This convention is attended by Certified Registered Nurse Anesthetists (CRNAs) and Student Nurse Anesthetists (SRNAs) from across the region who will earn over 20 continuing education credits, network with their peers, and explore the new products and services offered in the ever-changing medical marketplace. You are invited to view our exhibitor and sponsor opportunities below, and we look forward to your participation!

WHO ATTENDS THE TxANA ANNUAL CONVENTION?
☆ Certified Registered Nurse Anesthetists
☆ Students from the 5 Texas based anesthesia schools
☆ Expected attendance +/- 350 registrants

WHO EXHIBITS?
☆ Pharmaceutical companies
☆ Financial services
☆ Medical liability insurance providers
☆ Medical equipment suppliers
☆ CRNA recruiting/locums service companies
☆ Medical billing companies
☆ Publishers

WHY SHOULD MY COMPANY JOIN TxANA IN HOUSTON?
☆ 10.5 exhibit hours
☆ Limited exhibit space available – only 30 booth spaces
☆ One-on-one time with decision makers
☆ Friday and Saturday beverage breaks with attendees
SPONSORSHIP OPPORTUNITIES

-Platinum Sponsor- $4,000
  🌟 Exhibit Booth with 1st round booth location selection.
  🌟 Sole Breakfast or Happy Hour sponsor.
  🌟 Poster with logo during Breakfast or Happy Hour.
  🌟 5-minute presentation time to attendees during “Welcome Announcements”.
  🌟 Logo or Commercial displayed on projection screen during meeting.
  🌟 Logo at footer of all emails sent to attendees.
  🌟 Full page ad on electronic agenda placed online and sent to attendees.
  🌟 1 complimentary CRNA registration for CEs at conference.

-Gold Sponsor- $2,500
  🌟 Exhibit Booth with 2nd round booth location selection.
  🌟 Refreshment Break sponsor.
  🌟 Poster with logo during Refreshment Break.
  🌟 Logo at footer of agenda email sent to attendees.
  🌟 ½ page ad on electronic agenda placed online and sent to attendees.
  🌟 1 complimentary CRNA registration for CEs at conference.

-Silver Sponsor-
  🌟 Please choose any of the following options (advertising, sponsorship or exhibiting):

-Advertising-

<table>
<thead>
<tr>
<th>Size of Ad</th>
<th>Price</th>
<th>Format &amp; Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Page</td>
<td>$300</td>
<td>PDF/electronic-only format.</td>
</tr>
<tr>
<td>Half Page</td>
<td>$175</td>
<td>Due by 7/1/2016</td>
</tr>
</tbody>
</table>

Advertising Subtotal: $_______

-Sponsorships-

<table>
<thead>
<tr>
<th>Type of Sponsorship</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted Educational Grant</td>
<td>$1,500</td>
</tr>
<tr>
<td>Breakfast</td>
<td>$2,000</td>
</tr>
<tr>
<td>Sole Breakfast Sponsor with 5 minute presentation during “Welcome Announcements”</td>
<td>$3,000</td>
</tr>
<tr>
<td>Refreshment Break</td>
<td>$1,000</td>
</tr>
<tr>
<td>Happy Hour</td>
<td>$2,000</td>
</tr>
<tr>
<td>Student Registration</td>
<td>$200</td>
</tr>
</tbody>
</table>

Sponsorship Subtotal: $_______
-Exhibitions-

<table>
<thead>
<tr>
<th>Registration</th>
<th>Deadline</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exhibit Registration</td>
<td>By 6/1/2016</td>
<td>$1,200</td>
</tr>
<tr>
<td>Exhibit Registration</td>
<td>After 6/1/2016</td>
<td>$1,400</td>
</tr>
</tbody>
</table>

Exhibitor Registration Subtotal: $________

**EXHIBIT HOURS:**

**Thursday, August 4, 2016:**
3:00 p.m. to 6:00 p.m. Exhibitor Move-In

**Friday, August 5, 2016:**
6:00 a.m. to 7:00 a.m. Exhibitor Move-In
7:00 a.m. to 5:30 p.m. Exhibits Open
7:00 a.m. to 8:30 a.m. Continental Breakfast with Exhibitors
TBA Refreshment Break with the Exhibitors
TBA Refreshment Break with the Exhibitors

**Saturday, August 6, 2016:**
7:00 a.m. to 5:00 p.m. Exhibits Open
7:00 a.m. to 8:30 a.m. Continental Breakfast with the Exhibitors
TBA Refreshment Break with the Exhibitors
TBA Refreshment Break with the Exhibitors
5:00 p.m. to 6:00 p.m. Exhibitor Move Out

**WHAT’S INCLUDED WITH YOUR EXHIBIT RESERVATION:**

- 8’ x 10’ Pipe and Drape Booth Space
- 6’ x 30” skirted and draped table
- Two chairs and one wastepaper basket
- Exhibits will be held in a fully carpeted and lighted meeting room
- Official name badges for the first two (2) representatives (additional representatives will be charged $75.00 exhibitor registration fee to assist with food and beverages served in the exhibit hall)
- One copy of the Official Program
- Continental breakfast on Friday and Saturday with the registrants
- Refreshment breaks inside the exhibit hall

Electrical, audio visual equipment, and/or internet service is not provided. An order form will be forwarded to you upon acceptance of your contract.

Exhibit booths will be assigned by TxANA on a first-come, first-served basis. We will try our best not to place competitors next to one another. Exhibit diagram and the Rules & Regulations for Exhibitors will be forwarded with confirmation contract.
HOTEL INFORMATION:

Westin Galleria
5060 West Alabama
Houston, TX 77056

Group Room Rate: $159.00 + taxes
Reservations: 1-888-627-8514
Cut-Off Date: July 13, 2016

Please support TxANA by “booking” in the block of rooms that the association has provided so that the association can continue to provide quality education and services for its members. TxANA negotiates on behalf of the entire event which includes many logistical requirements and needs. In order for TxANA to continue to be able to book on behalf of the group it is important that attendees utilize the group room block when making hotel room reservations. Making reservations outside the group block causes the association to suffer monetary damages and ends up costing the association and its members and will affect future registration and exhibit fees. Thank you for your support.

RESERVATIONS:

Please make your reservation using the online portal:
https://www.starwoodmeeting.com/events/start.action?id=1602173401&key=35AB9DED

You may also call Reservations at 1-888-627-8514. Please identify yourself as attending the Texas Association of Nurse Anesthetists 2016 Annual Convention.

Hotel Guest Room Rate: $159.00 Single or Double, plus taxes.
All guest room reservations must be guaranteed with a credit card or advance deposit.
A deposit equal to one night’s room rate is required by check, money order, cashier’s check, or major credit card and is due with each reservation.

Hotel Cutoff Date: July 13, 2016 - 5:00 p.m.
Reservations requested after cut-off date will be subject to space and rate availability only. Rooms tend to sell-out early please do not delay in making your room reservation.

Parking:
Complimentary self-parking.

CONFERENCE ATTIRE:
Meeting attire will be business casual. Please remember that meeting room temperatures are hard to regulate. Please bring a sweater or jacket to insure your personal comfort.

EXHIBIT CANCELLATION POLICY:
Cancellations of the “Contract to Exhibit” must be made in writing to TxANA. If written notice of cancellation is received prior by July 1, 2016 a full refund less a $300 administrative fee will be made for each exhibit booth that is cancelled. No refunds will be given for cancellations made after July 15, 2016 or for “no show” exhibitors. All exhibit fees must be paid upon submission of the “Contract to Exhibit.”
GENERAL INFORMATION:  
(to be completed by exhibitors, advertisers and sponsors)

Company: ________________________________________________________________

Contact Name: __________________________________________________________

Address: __________________________________________________________________

City: ___________________________________________  State: ______  Zip Code: ______

Phone Number: ___________________________  Fax Number: ______________________

E-mail: _________________________________________________________________

Type of Company/Product sold: ______________________________________________

POLICIES & PROCEDURES

Sponsorship and Exhibit Space Rental Policy: Payment in full for all exhibit table(s), sponsorships and/or advertisements must be received with this contract. Payment must be received in full. A contract without payment in full will not be accepted.

Written notice of cancellation(s) received in the TxANA office by July 15, 2016 will entitle the cancelling party to a refund of monies submitted minus a $300.00 handling fee. No refunds will be allowed for cancellations made after July 31, 2016. Exhibitors who sign up and pay after July 31, 2016 will not be entitled to a cancellation refund. Trade Show Rules & Regulations: Exhibitors and sponsors agree to observe all Rules & Regulations set forth by TxANA and the Westin Galleria at the Houston Galleria.

I accept all Policies & Procedures.

Signature: ______________________________________________________________  Date: ____________
PAYMENT

Total value of Exhibit Tables, Sponsorship, and/or Advertising:

$____________________

Payment Method:

☐ Check # __________  ☐ MasterCard  ☐ VISA  ☐ American Express  ☐ Discover

Card Number: ___________________________________________ Exp. Date: __________

Name on Card: ___________________________________________ Security #: __________

Signature: ______________________________________________________________________

Mailing address for card: _______________________________________________________

________________________________________________________________________________

TxANA’s EIN: 51-0136915

Make check(s) payable & send to:
Texas Association of Nurse Anesthetists, Inc.
888 Banister Ln. Austin, TX 78704

QUESTIONS:

Andrea Pee, BA
Executive Assistant
Texas Association of Nurse Anesthetists, Inc.
888 Banister Ln. Austin, TX 78704
Phone: 512-495-9004
Fax: 512-495-9339
Email: andrea@txana.org
Exhibitor Registration Form
SUBMIT BY: July 1, 2016

One name per form – Name Badge Registration

Each exhibitor receives 2 complimentary registrations. Additional name badge/registration may be purchased for $75/each.

First Name: ____________________________  Last Name: ___________________________

Nickname: ____________________________  Title: ___________________________

Company Name:
____________________________________________________________________________

Phone: ____________________________  E-mail: ____________________________

Mailing Address:
____________________________________________________________________________

City/State/Zip Code:
____________________________________________________________________________

⭐ AANA I.D. Number: ____________________________

⭐ Should your company have a CRNA who wishes to receive CE credits at the meeting, please fill in the AANA Number. One CRNA per booth purchased. Additional CRNAs must purchase a registration to obtain CE credits.

Each exhibit booth receives two complimentary name badges for the entire meeting. Cost for additional name badges is $75.00 per badge. This charge assists with covering the F&B expenses at the event.
2nd Complimentary Name Badge Registration

SUBMIT BY: July 1, 2016 – One name per form

First Name: ______________________________________ Last Name: ______________________

Nickname: ______________________________________ Title: _____________________________

Company Name:
______________________________________________________________________________

Telephone: _______________________________ E-mail: _______________________________

Mailing Address:
______________________________________________________________________________

City/State/Zip Code:
______________________________________________________________________________

⭐ AANA I.D. Number: ______________________

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