

67th Annual Fall Convention

September 25–27th, 2018 — Ramkota Hotel, Sioux Falls, SD

Quality Care

It's a Whole New Ball Game



SDHCA

Leaders in Long Term Care



67th Annual Fall Convention

Exhibit Information

The South Dakota Health Care Association is celebrating its 67th Annual Fall Convention. This is your opportunity to exhibit at our Convention as well as provide sponsorship to gain the **most exposure for your company!** To provide sponsorship to SDHCA, simply mark “Sponsorship Row” on your Exhibit Show Registration!

CONVENTION DATES & LOCATION

The 67th Annual Fall Convention will be held **September 25th – 27th, 2018** at the Ramkota Exhibit Hall in Sioux Falls, South Dakota.

The Exhibit Show will be held on **Wednesday and Thursday**. The Exhibit Show will begin with an exhibitor reception (social) Wednesday afternoon, followed by our PAC Dinner. Exhibits will resume Thursday morning at 9:30 am and continue until 1:15 pm.

EXHIBIT LOCATION

The Exhibit Show will be held in the Annex located in the Exhibit Hall. Meals and snacks for attendees will be co-located with the exhibit area to encourage attendees to interact with exhibitors.

EXHIBIT BOOTH SPECIFICATIONS

All exhibit booths will be **10' x 10' wide**. Each booth will be provided with a complimentary draped table and two chairs. Electricity will be provided if requested on your registration. A 110-volt outlet is available; if a 220-volt is needed there will be an additional charge. Extension cords may be required and are the exhibitor's responsibility. Special electrical needs should be discussed with SDHCA well in advance of the exhibit show. Any other furniture or equipment needs besides the above listed is the responsibility of the exhibitor.

EXHIBIT HOURS

The following times will be set aside for exhibitors to visit with attendees in the Annex:

Wednesday, September 26th

4:45 – 6:00 pm Exhibitor Reception (Social)

Thursday, September 27th

9:30 – 10:30 am Break

12:00 – 1:15 pm Lunch

DISPLAY STORAGE

The Ramkota Hotel will accept freight for storage a few days prior to the Convention. Exhibitors will need to make arrangements with Julie Coleman at the Ramkota Hotel at (605) 336-0650.

EXHIBITOR DOOR PRIZES

As an exhibitor, you may give away a door prize. Please indicate your door prize item on your Registration. To be eligible to win, the attendees must sign up at your booth during the Exhibit Show. The drawings will be held throughout the Exhibit Show hours. SDHCA will announce your company's name and the winner at your booth.

SPECIAL EVENTS

Our Annual Awards Breakfast will be Wednesday, September 26th. Watch for information in our electronic updates regarding details of the Awards Breakfast if you would like to attend. The SDHCA PAC will be hosting its “PAC Dinner” on Wednesday, September 26th, 2018. We encourage your attendance! Please contact Brett at (605) 339-2071 or BrettHoffman@sdhca.org to reserve your seat.

*Membership must be paid current at time of Exhibit Show to receive Member rates. Exhibit pricing is based on the date your signed application is received in our office. If an exhibitor cancels its booth space, \$250.00 will be retained for administrative expenses. **No refunds will be issued after August 17, 2018.**

BOOTH SETUP & DISMANTLE TIMES

Exhibitors will be able to set up their booths on Wednesday, in the Annex of the Ramkota from **1:30 – 4:00 pm.**

Note: The booths MUST be set up during this time. If you need to set up at another time, you will need to contact the SDHCA office **PRIOR to Convention** to make special arrangements. The booths need to be dismantled immediately following the lunch at 1:15 pm.

EXHIBIT FEES

There are two exhibit options, offering two levels of visibility and price points. For either option, SDHCA Corporate Members receive the best value. All interested organizations are invited to become Members and utilize these savings, in addition to other benefits of SDHCA Corporate Membership.

The exhibit cost includes up to 4 people. We will need their information on the registration to create name badges. Exhibitors are encouraged to attend sessions during the Convention and are eligible to receive continuing education credits for their attendance.

Sponsorship Row:

Member Rates*:

<u>Early Bird:</u> (Aug 10 th)	<u>Advanced:</u> (Aug 31 st)	<u>After Aug 31st:</u>
\$1,550	\$1,600	\$1,650

Non-Member Rates:

<u>Early Bird:</u> (Aug 10 th)	<u>Advanced:</u> (Aug 31 st)	<u>After Aug 31st:</u>
\$2,100	\$2,150	\$2,200

Sponsorship Row includes a centrally located booth and ribbon indicating Sponsor status. This package also includes signage indicating sponsorship of the snack break, located near Sponsorship Row, as well as special recognition in the program booklets.

General Row:

Member Rates*:

<u>Early Bird:</u> (Aug 10 th)	<u>Advanced:</u> (Aug 31 st)	<u>After Aug 31st:</u>
\$775	\$825	\$875

Non-Member Rates:

<u>Early Bird:</u> (Aug 10 th)	<u>Advanced:</u> (Aug 31 st)	<u>After Aug 31st:</u>
\$1,400	\$1,450	\$1,500

General exhibitors receive excellent access to SDHCA Members during the conference and are recognized in the printed program.

REGISTRATION

Whoever completes the exhibit registration form is responsible for providing SDHCA with the correct information (i.e. **description of services** and correct spelling of contact information) to be printed in the booklet **at time of submission**. Please note: **We are unable to accommodate last-minute changes or additions to our printed materials**, as we have hard printing deadlines for our numerous Convention materials.

OTHER OPPORTUNITIES

“Sponsorships can increase the number of visitors to your booth by as much as 50%.”

-Center for Exhibition Industry Research

For organizations wishing for additional ways to reach SDHCA Members, please see the inserts regarding:

- Sponsoring a speaker*
- Sponsoring the lunch
- Premier mobile app sponsorship

*Rates vary based on the speaker. All topics are selected by the SDHCA Education Committee

EXHIBIT INQUIRIES

Leah Janssen
SDHCA Exhibit Coordinator
LeahJanssen@sdhca.org

67th Annual Fall Convention Exhibit Show

RULES AND REGULATIONS FOR EXHIBITING

1. **MANAGEMENT** - All arrangements for exhibits are to be made with the SDHCA office.
2. **BOOTH EQUIPMENT** - The price of the exhibit booth includes back and side drapes.
3. **SIGN** - Each exhibitor is to provide signage identifying their company.
4. **FURNITURE** - One draped and skirted table and two chairs are furnished with your booth fee.
5. **ELECTRICITY**- Electricity will be accessible to all exhibit booths. **Electrical cords are the responsibility of the exhibitor.** A 110-volt outlet is available; if a 220-volt is needed, there may be an additional charge and must be arranged with the Ramkota prior to the show.
6. **SHIPPING** - All arrangements for shipping and receiving of materials must be made by the exhibitor directly with the management of the Ramkota Hotel, Sioux Falls, South Dakota.
7. **ASSIGNMENT OF SPACE** - Priority is given based on when the application is received. Refunds will be given if notified prior to **August 17th, 2018, less \$250.00 administrative fee. Please include payment with registration if paying by check. Please contact the SDHCA office if you wish to pay by credit card.**
8. **EXHIBIT** - Management reserves the right to limit products/services displayed.
9. **LIABILITY** - It is agreed that any damage to walls, furniture, rugs or other Ramkota Hotel property shall be chargeable to the exhibitor liable for such damage. It is further agreed that the exhibitor shall indemnify and exempt the South Dakota Health Care Association and the Ramkota Hotel from all liability, which may ensue from any cause whatsoever. The SDHCA and the Exhibit Management shall not be held responsible for the safety of exhibits against fire, theft, or property damage or for accidents to exhibitors or their employees. Exhibitors should place their own insurance to cover all contingencies.
10. **SOUTH DAKOTA HEALTH CARE ASSOCIATION** - SDHCA reserves the right to remove any exhibit which may detract from the general character of the Convention.
11. **EXHIBIT HOURS** - Exclusive times have been planned so that registrants may thoroughly visit the exhibits.
12. **ALL** exhibits must be removed from the exhibit area after the lunch concludes at 1:15 pm on Thursday, September 27th, 2018.
13. **EXHIBIT FEES**- Rates are based upon the **date the signed registration is received** in the SDHCA office. Membership must be paid current to receive Member rates on booth costs.

67th Annual Fall Convention Exhibit Registration

September 26th-27th, 2018

COMPANY _____
 (Type or print as it should appear on all promotional materials)

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE** _____

Billing Contact: _____

Email Address: _____

Names & Titles of those staffing your booth, as they will appear on name badges:

NAME _____ **TITLE** _____

NAME _____ **TITLE** _____

NAME _____ **TITLE** _____

NAME _____ **TITLE** _____

Description of the product/service of your company as you would like it PRINTED in the Convention Booklet: (Must be completed)

Does your booth require electricity? No _____ Yes _____ (110 volt _____ -OR- 220 volt _____)

EXHIBITOR will contribute a door prize? No _____ Yes _____ Item _____

I, on behalf of my company, hereby agree to exhibit as indicated on this form at the 67th Annual Fall Convention on September 26-27, 2018. I understand there will be a **\$250.00 penalty for cancellations and that no refund will be issued after August 17th, 2018**. I state further that I have read the enclosed Exhibitor Rules and Regulations and that I agree to contents thereof.

By _____
 Authorized Signature

Date _____

Name _____
 Please Print

Title _____

	Early Bird (Aug 10 th)	Advanced (Aug 31 st)	After Aug 31st
Sponsorship Row (Member) <input type="checkbox"/>	\$1,550.00	\$1,600.00	\$1,650.00
(Non-Member) <input type="checkbox"/>	\$2,100.00	\$2,150.00	\$2,200.00
	Early Bird (Aug 10 th)	Advanced (Aug 31 st)	After Aug 31st
General Row (Member) <input type="checkbox"/>	\$775.00	\$825.00	\$875.00
(Non-Member) <input type="checkbox"/>	\$1,400.00	\$1,450.00	\$1,500.00

In-Office Use Only:

Date Received _____

Amount Received _____

Membership Renewal Month: _____

Paid Current? (Y/N) _____

SOUTH DAKOTA HEALTH CARE ASSOCIATION
 804 N Western Avenue | Sioux Falls, SD 57104 | Ph: (605) 339-2071 | Fax: (605) 339-1354 | LeahJanssen@sdhca.org

**REGISTRATION MUST BE RECEIVED BY AUGUST 31ST, 2018
 TO GUARANTEE BOOTH SPACE AND BE PRINTED IN THE FALL CONVENTION BOOKLETS**