Exhibitor & Sponsor Registration

Statewide Hospice & Palliative Care Summit
Improving Serious Illness Care in Connecticut

May 9, 2019
Aqua Turf Club, 556 Mulberry St., Plantsville, CT 06479

A Tribute to Florence Wald

This activity has been submitted to the Connecticut Nurses’ Association for approval to award contact hours. The Connecticut Nurses’ Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

This program has been approved for Continuing Education Credit Hours by the National Association of Social Workers, CT and meets the continuing education criteria for CT Social Work Licensure renewal. Approval also meets the continuing education criteria for CT LMFTs, LPCs, and licensed psychologists.
Who We Are

Connecticut Association for Healthcare at Home is the largest member group of home health and hospice providers in Connecticut. The Association supports its members in the provision of exceptional quality and accessible home care and hospice services through collaboration, leadership, provision of information, advocacy and education.

Why Exhibit?

The Association represents nearly 90% of the hospice providers in Connecticut and is continuously offering sponsorship and exhibiting opportunities. The Statewide Hospice & Palliative Care Summit is an opportunity for you to showcase your company to our home health and hospice providers.

Overview

Calling all Palliative and Hospice Care Providers!
Don't miss our annual Statewide Hospice and Palliative Care Summit. Hear national and regional expert perspectives for “Improving Serious Illness Care in Connecticut.”

Dr. Suzana Makowski will share her experiences growing the Palliative Care Program at Exeter Hospital in New Hampshire and engage you to develop strategies to improve earlier access to both palliative and hospice care in CT.

Knowing that palliative and hospice care requires a level of empathy and dedication that needs support and recognition to be sustained, the afternoon will be a time to reflect and connect our valued caregivers through a new and exciting process called Expressive Digital Imagery (EDI).

Shipping Information

Shipments can be received at the Aqua Turf Club three days in advance of the summit.

Please label all packages with the following:
Aqua Turf Club
c/o CT Association for Healthcare at Home
556 Mulberry St.
Plantsville, CT 06479
We can customize a sponsorship to meet your marketing goals and budget.

Contact Courtney Verissimo at: verissimo@cthealthcareathome.org or 203-774-4943

2019 Sponsorship & Exhibitor Opportunities

Program Sponsor  $1,250 Member
Includes:
• One 6’ exhibit table with electricity in prime location ($380 value)
• 2 complimentary program registrations ($100 value)
• Company logo displayed on Association event page
• Company logo displayed at each attendee table
• Opportunity to showcase company during lunch
• Opportunity to participate in Tea Cup Auction

Keynote Sponsor  $750 Member
Includes:
• One 6’ exhibit table with electricity in prime location ($380 value)
• 1 complimentary program registration ($50 value)
• Company logo displayed on Association event page
• Company logo displayed at each attendee table
• Opportunity to participate in Tea Cup Auction

Exhibitor  $350 Member
Includes:
• One 6’ exhibit table (Additional $30 for electricity)
• 1 complimentary program registration (Additional $50 per registrant)
• Opportunity to participate in Tea Cup Auction

Lunch Sponsor  $1,000 Member
Includes:
• One 6’ exhibit table with electricity in prime location ($380 value)
• 2 complimentary program registrations ($100 value)
• Company logo displayed on Association event page
• Company logo displayed at each attendee table
• Opportunity to participate in Tea Cup Auction

Technology Sponsor  $650 Member
Includes:
• One 6’ exhibit table in prime location ($350 value)
• 1 complimentary program registration ($50 value)
• Company logo displayed at each attendee table
• Opportunity to participate in Tea Cup Auction

Tea Cup Auction
The Florence Wald Tea Cup Auction is a wonderful way to support the Association and the hospice community in Connecticut. We use donated prizes to raise funds in support of the conference and for future hospice-related education programs. If interested, your company would be listed as donating the prize at the auction table. We would be most grateful if you would be willing to donate an item or gift certificate to this fundraiser! Please use the registration form to provide a description of your item.
Registration Form

May 9, 2019 | Aqua Turf Club, Plantsville CT

Contact Information

Organization Name: ________________________________________________________________
Contact Name: ______________________________________________________________
Contact Title: ________________________________________________________________
Address: _______________________________________________________________________
City, State and Zip: _______________________________________________________________________
Telephone: _____________________________________________________________________ Email: _______________________________________________________
Website: _______________________________________________________________________

Attendees

Name: __________________________ Title: __________________________ Email: __________________________
Meal Choice: □ Chicken □ Fish □ Beef □ Vegetarian

Name: __________________________ Title: __________________________ Email: __________________________
Meal Choice: □ Chicken □ Fish □ Beef □ Vegetarian

*Please advise if you have a dietary restriction.

Competitors

Please list any companies that you prefer not to be placed near. Although there is no guarantee that we will be able to accommodate your request, we will make every effort to do so. _______________________________________________________________________

Payment Options

Credit Card: □ Visa □ Master Card □ American Express □ Discover
Cardholder’s Name: ________________________________________________________________
Billing Address: _______________________________________________________________________
City, State and Zip: _______________________________________________________________________
Credit Card #: __________________________ Exp. Date: ______
CVV/Security Code: ________ Telephone: __________________________

Check: □ Included OR □ Will be sent separately

TOTAL DUE:

Payment/Cancellation Policy
Payment must be made in advance of this program. Payment can be made by cash, check, or credit card. Cancellations made on or after April 18th, or ‘no shows’ will forfeit the registration fee. Cancellations must be received in writing via e-mail.