

Register at nehospice.org



2023 Conference

Exhibitor & Sponsor
Opportunities

Nebraska Hospice
& Palliative Care Association

March 21-22, 2023 | Lincoln, NE

2023 NHPCA ANNUAL CONFERENCE 1

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Nebraska Hospice and Palliative Care Association (NHPCA) is proud to host the “Living a Good Life...Through Every Chapter” conference each year. This regional event brings together more than 300 professionals who care for patients and families with chronic or terminal illnesses, including physicians, nurses, therapists, social workers, administrators, and counselors. The conference will feature nationally respected keynote speakers, an awards luncheon, trade show, raffle, silent auction, and breakout education sessions.

LOCATION

LODGING

Embassy Suites by Hilton Lincoln

1040 P Street
Lincoln, NE 68508
Phone 402-474-1111

A room block has been set aside for exhibitors and attendees at Embassy Suites. Please make reservations by Feb. 21, 2023, to guarantee NHPCA room rates. Use this link to make your room block reservations: <https://rb.gy/hhz9hh>

EXHIBITOR OPPORTUNITIES

Trade show exhibitors will have multiple opportunities to meet and engage with conference attendees. All exhibitors receive a pre-conference attendee mailing list sent via email prior to the show, a post-conference attendee mailing list sent via email following the show, and two complimentary lunch tickets.

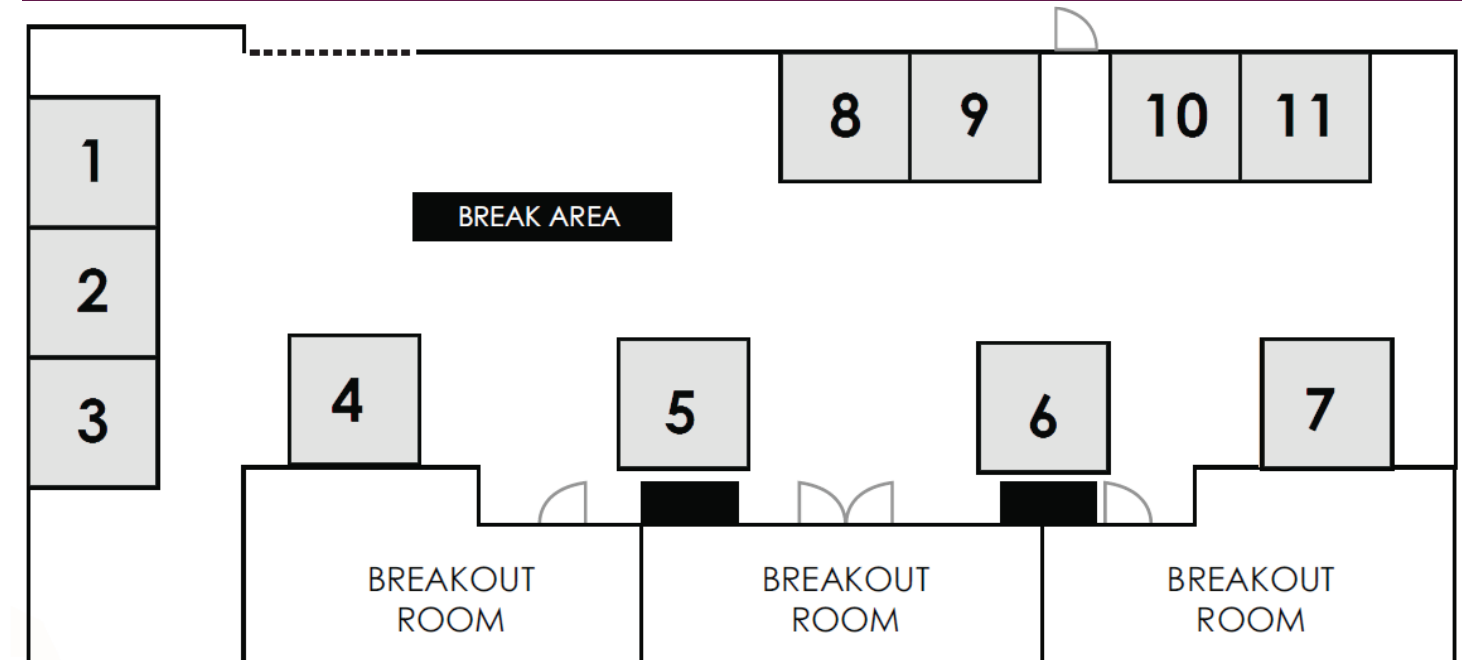
EXHIBIT BOOTH DETAILS

Each booth is 8' x 8' and includes back and side drapes, one table, two chairs, and complimentary electricity. The Embassy Suites exhibit areas are fully carpeted. **Only one vendor company per booth. If more than one vendor exhibits in a booth, each will be charged the exhibition fee. There will be limited availability for a few additional tables in the group session rooms, if needed.*

SHIPPING AND STORAGE

Inbound shipments must be scheduled to arrive no more than three (3) business days prior to the conference. Clearly label all boxes with your name, company name, and “Nebraska End-of-Life Conference” and send to Embassy Suites, 1040 P Street, Lincoln, NE, 68508.

EXHIBIT HALL MAP



EXHIBITOR SCHEDULE

MONDAY, MARCH 20, 2023

4:00 pm - 12:00 pm

Exhibitor Move In

TUESDAY, MARCH 21, 2023

7:30 am - 5:45 pm

4:15 pm - 5:45 pm

6:30 pm - 12:00 am

Trade Show Open

Vendor Cocktail Hour

Exhibitor Breakdown

If any exhibitor is interested in staying open for Wednesday from 7:30 am - 11:00 am this option is available.

EXHIBITION FEES

2023 NHPCA Members.....\$500

Non-Members.....\$1000

RESERVATION AND PAYMENT

Booth space is reserved on a first-paid, first-served basis. To guarantee your reservation and appear in the conference app, payment must be received by March 1, 2023. Reservations will be accepted until all space is sold. Cancellations must be submitted in writing to NHPCA by March 1. A \$50 processing fee will apply. No refunds will be issued for cancellations received after March 1. Use the following link or the form on page 5 to register for the trade show. <https://rb.gy/vlphzg>

2023 SPONSORSHIP OPPORTUNITIES

All conference sponsors receive their company name, logo and contact information in the conference app, on the conference sponsor sign, on designated event signage, and on the NHPCA website. Sponsorships are sold on a first-paid, first-served basis.

<p>AWARDS LUNCHEON - 1 Available \$2,000 Member, \$2,500 Non-Member</p> <p>Receive the opportunity to provide marketing materials at luncheon tables. Includes two complimentary luncheon tickets.</p>	<p>GENERAL SPONSORSHIP \$1,000 Member, \$1,500 Non-Member</p> <p>See your company's logo printed on signs throughout the conference and your company's name listed in the conference app.</p>
<p>BREAK - 6 Available \$350 Member, \$750 Non-Member</p> <p>Receive recognition during the break.</p>	<p>LANYARDS - 1 Available \$1,500 Member, \$2,000 Non-Member</p> <p>See your company's name printed on attendees' name badge lanyards.</p>
<p>WI-FI - 1 Available \$1,000 Member, \$1,500 Non-Member</p> <p>Your company's name will be the Wi-Fi password for the event, and your logo will be printed on the Wi-Fi information page distributed to attendees.</p>	<p>NAME BADGES - 1 Available \$1,000 Member, \$1,400 Non-Member</p> <p>See your company's name printed on attendees' name badges.</p>
<p>LUNCH - 1 Available \$750 Member, \$1,200 Non-Member</p> <p>Receive the opportunity to provide marketing materials at lunch tables.</p>	<p>TOTE BAG - SOLD \$1,500 Member, \$2,000 Non-Member</p> <p>See your company's logo printed on the conference attendee tote bags.</p>
<p>RAFFLE AND SILENT AUCTION</p> <p>Donate an item or package to the raffle or silent auction. All contributions are used to fund scholarships for hospice providers seeking further education.</p>	<p>BANNER AD IN APP - 10 Available \$500 Member, \$750 Non-Member</p> <p>Your company will be featured in a banner ad in the conference app.</p>

2023 EXHIBITOR AND SPONSOR REGISTRATION

Use this form OR register online at <https://rb.gy/vlphzg>

EXHIBITOR OPPORTUNITIES – Please check your selections.

- 2023 NHPCA Member (\$500)
 Non-Member (\$1000)
 Exhibit Booth Electricity (complimentary)

Exhibit booth location request – #1-13; see map on page 3. Please list three choices; space will be assigned on a first-paid, first serve basis.

Choice 1 _____ Choice 2 _____ Choice 3 _____

Names of Exhibitors – as they should appear on name badges; limit two.

1. _____
 Attending Tuesday Awards Lunch: yes no
2. _____
 Attending Tuesday Awards Lunch: yes no

SPONSOR OPPORTUNITIES – Please check your selections. Price listed as Member/Non-Member.

- Awards Lunch (\$2,000/\$2,500) General Sponsorship (\$1000/\$1,500)
 SOLD Tote Bags (\$1,500/\$1,900) Lanyards (\$1,500/\$2,000)
 Wi-Fi (\$1,000/\$1,500) Name Badges (\$1,000/\$1,400)
 Raffle (Item Value: \$_____) Lunch (\$750/\$1,200)
 Banner Ad in App (\$500/\$750) Break (\$350/\$750)

CONTACT INFORMATION – As should appear on promotional materials.

Company Name _____
 Contact Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____
 Email _____ Website _____

PAYMENT

Total Fees Due (from above selections) \$ _____
 Payment method (check one) Check (payable to NHPCA) Credit Card
 Cardholder's Name _____
 Credit Card # _____
 Expiration Date _____ CVC Code _____
 Cardholder's Billing Address _____
 City _____ State _____ Zip _____
 Email _____
 Signature _____
 (your signature on the line above will authorize this transaction)



www.nehospice.org

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MEMBER CHARITY

Nebraska Hospice and Palliative Care Association

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