

Sponsorship Options



Emergency Services Forum
May 6, 2024, Hyatt Regency Newport Beach

Why sponsor?

In the exhibit area, participants will be able to interact with decision makers of hospital emergency departments.

What's the display space like?

Sponsors will have a tabletop display in the exhibit area with food and dedicated times for networking.

Who are our attendees?

Emergency department leaders including emergency department physicians, chief nursing officers, emergency department directors, hospital administrators, EMS personnel and public health officials.

How many attend?

Approximately 75+ participants.



Select Your Level of Participation

| Benefits | Platinum Sponsor \$3,500 | Gold Sponsor \$2,500 | Silver Sponsor \$1,500 |
|---|-----------------------------|-------------------------|---------------------------|
| Exclusive sponsor of luncheon with opportunity to address the attendees | √ | | |
| Color ad in rotating conference PowerPoint | 1 | 1 | |
| Complimentary registrations to the educational program | 2 | 1 | |
| Exhibit table with electricity in exhibit area* | √ | √ | √ |
| Company logo on Emergency Services Forum website | √ | √ | √ |
| Acknowledgement at the beginning of the program | √ | √ | √ |
| Attendee list | √ | √ | √ |

Additional Fees

\$325 Registration for *each additional* representative
*Silver and Gold levels allowed one rep at display table

Where and When

May 6, 2024
Hyatt Regency Newport Beach
1107 Jamboree Road
Newport Beach, CA 92660

Contact

Lisa Hartzell
Director, Event Management
(916) 552-7502
lhartzell@calhospital.org
<https://calhospital.org/education-publications/cha-event-sponsorship/>

CHA reserves the right to decline exhibitor applications.

Exhibit Rules



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Space Assignments

Assignment of tables will be made by the California Hospital Association (CHA) based on the following criteria: exhibitor level, order in which reservations are received, number of tables purchased, suitability and availability of locations.

Space and Services Included in Fee

Space charge is included in exhibitor fee. Items provided are: draped 6-foot table, 1 to 2 chairs, table-tent card with company name. Exhibitors are also listed in the conference program with a description of up to 75 words.

Exhibit Refund Policy

Exhibit fees are NON-REFUNDABLE.

Preliminary Exhibit Dates and Hours

(Date/Times are approximate and subject to change)

Location: Terrace Ballroom

Monday, May 6

Set-up: 6:00 a.m. – 7:00 a.m.

Viewing: 7:00 a.m. – 4:15 p.m.

Dismantling: 4:15 p.m.

Exhibit Set-up and Clean-up

Set-up of exhibits must be completed and ready for inspection by **7:00 a.m. on Monday, May 6**. No set-up work will be permitted after this time without specific permission from CHA. Exhibitors are prohibited from dismantling their exhibits until the designated tear-down time of **4:15 p.m. on Monday, May 6**. It is the responsibility of the exhibitor to remove all materials from the exhibit area on Monday.

Admittance to the Forum

Exhibit hall admittance is limited to symposium attendees and company representatives who have contracted and paid for exhibit space.

Eligible Exhibits

CHA reserves the right to refuse rental of display space, exhibit, or any part of an exhibit to any company.

Exhibitor Raffle

Exhibitors will have an opportunity to give prizes to the attendees. Each exhibitor is limited to two raffle prizes minimum value of \$100 is recommended.

How the Prize Drawing Works!

An exhibit tour card with a list of each participating vendor will be made available within the exhibit area. To enter and win a prize, the attendee must receive a sticker (CHA will provide stickers) from all vendors. Once they have visited each vendor they can enter the completed card in the raffle prize basket. The raffle will take place at the last break. A CHA representative will ask you to come up and draw the winner of your prize. The attendee must be present to win and CHA will provide the winner's contact information to the donating exhibitor.

Fire and Safety

All flammable materials must be flame proofed before being placed in the exhibit area. All materials and installations are subject to the fire and safety regulations in force by state and/or city fire authorities. Exhibitors must provide certification of flame proofing if requested by show management or the fire department. Volatile or flammable fluids, substances or materials of any nature are prohibited in any booth.

Social Functions

Social functions sponsored by exhibitors must not be scheduled during exhibit hours or during the CHA education program. Any function not approved by CHA that would compete for attendees' time, either during the hours of the exhibition or hours of educational sessions, general sessions or programs is prohibited.

Security

Exhibitors are responsible for any valuables at their booth. Security guards will be present at all times.

Exhibitor Checklist



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Please provide the following by **April 14, 2024**

- Exhibit fees—make checks payable to CHA/CAHHS or provide Visa, MasterCard or American Express number with expiration date.
- Company logo in high resolution .jpeg file format.
- Electronic advertisement shown throughout conference.
Provide a single 16:9 slide to be placed within the conference PowerPoint deck
- A short description of your organization (75 words or less).
- A description of your tabletop, dimensions, and product(s) being displayed.
- A description of items you may wish to contribute for the Exhibit show raffle prize drawing.
**minimum value of \$100 is recommended*

All materials can be submitted via email: lhartzell@calhospital.org
Mail: CHA, Education Department, 1215 K Street, Suite 700, Sacramento, CA 95814

Hotel & Exhibit Information

- The Hyatt Regency Newport Beach has discounted sleeping rooms available starting at \$185 for single or double occupancy. For reservations, call (949) 729-1234 and mention the California Hospital Association to receive the discounted rate. Discount deadline is **April 14**.
- Exhibit area includes one draped, 6 ft table, (1 to 2) chairs and a name tent listing your company's name. Please contact Lisa Hartzell at 552-7502 or lhartzell@calhospital.org if you would like electricity at your tabletop and have not already signed up for it. **NOTE:** This is a table top exhibit. Each exhibitor will have roughly 8ft of space to display (this includes the 6ft table), so please plan accordingly.
- Shipping information: Packages must arrive **no sooner than Thursday, May 2, 2024**.

Ship to: Hyatt Regency Newport Beach
1107 Jamboree Road
Newport Beach, CA 92660
Attn: Amanda Malotte c/o CHA-Robin Campbell

*Please include your company name on the shipping label so the Hyatt Regency knows to look out for your package.

Exhibit Schedule on Monday, May 6

(Dates/times are approximate and subject to change.)

- **Set-up:** 6:00 a.m. – 7:00 a.m.
- **Viewing:** 7:00 a.m. – 4:30 p.m.
- **Dismantling:** 4:30 p.m.

Application



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Submit Completed Application

Fax: (916) 552-7506
E-mail: lhartzell@calhospital.org
Mail: California Hospital Association
Education Department
1215 K Street, Suite 700, Sacramento, CA 95814
Questions: Lisa Hartzell, (916) 552-7502

Select Your Level

- Platinum Exhibitor (\$3,500) Silver Exhibitor (\$1,500)
 Gold Exhibitor (\$2,500) Additional Registration (\$325)

Amount to be Billed: \$ _____

Billing Information

VISA MC AMEX

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Authorizing Signature: _____

**Make checks payable to "CAHHS/CHA"*

Attending Representatives

Please list exactly as you wish it to appear in conference program.

Representative #1: _____

Title: _____

Telephone: _____

E-mail (required): _____

Representative #2: _____

Title: _____

Telephone: _____

E-mail (required): _____

Authorization

Exhibitor assumes responsibility and agrees to indemnify and defend the California Hospital Association and the Hyatt Regency Newport Beach and their respective employees and agents against any claims or expenses arising out of the use of the exhibition premises. The Exhibitor understands that neither the California Hospital Association nor the Hyatt Regency Newport Beach maintains insurance covering the Exhibitor's property, and it is the sole responsibility of the exhibitor to obtain such insurance. Our company shall be bound by the terms and conditions in the Exhibitor Rules information material.

Authorized Signature: _____

Company Information

Please list your company name as you wish it to appear in marketing materials.

Company: _____

Contact Name/Title: _____

Address: _____

Telephone: _____

E-mail: _____

Company web address: _____

Please provide a brief description about your company. This description will be used in marketing materials. Please adhere to 75 words. CHA reserves the right to alter your description for marketing purposes.

Please list special request consideration in table assignments (e.g., companies you do not wish to be located next to). List specific company names, not products or services. CHA cannot guarantee requests will be met but will make every effort to accommodate them.

Representative #3: _____

Title: _____

Telephone: _____

E-mail (required): _____

Representative #4: _____

Title: _____

Telephone: _____

E-mail (required): _____

Date: _____