Celebrating 45 Years of Nursing Excellence

August 2-7, 2016
SHERATON MEMPHIS DOWNTOWN

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EXHIBITORS
PROSPECTUS

NATIONAL BLACK NURSES ASSOCIATION

44TH ANNUAL INSTITUTE & CONFERENCE

45th Anniversary
1971-2016
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**ABOUT NBNA:** The National Black Nurses Association represents approximately 150,000 African American nurses from the USA, Canada, Eastern Caribbean and Africa, with 95 chartered chapters nationwide.

**OUR MISSION:** The National Black Nurses Association's mission is “To represent and provide a forum for black nurses to advocate for and implement strategies to ensure access to the highest quality of healthcare for persons of color.”

**NEW FOR 2016:** There are two ways to pay and register for your booths.

1. **Mail** your registration form and check payment to the NBNA office.
2. **Email** your registration materials and purchase order directly to NBNA. Be sure to print a copy for your records before submitting the documents.
3. You will receive confirmation by email.
4. To register for sponsorship or advertising, please use the enclosed forms.
NBNA provides numerous vehicles to attain your marketing goals and, as a result, identify, target and influence attendees to purchase your products and services. Whether your goal is to increase brand recognition, drive traffic to your booth or send your company’s message home with each attendee, you will find what you need to meet your goals at NBNA 2016.

COMPANIES NAME THE FOLLOWING REASONS FOR INVESTING IN NBNA

- Generate leads and build relationships with nurse attendees
- Conduct quality conversations with nurse clinicians, researchers, educators and administrators and key leaders that positively impact the way they work
- Create brand and product portfolio awareness
- Participate in educational content
- Gain exposure to state of the knowledge of the latest nursing innovations
- Opportunity to see what competitors are doing and identify new trends and hot button topics
- More than 1,000 nurses attended the 2015 NBNA Conference in Atlanta

ANY COMPANY OR ORGANIZATION LOOKING TO TARGET THE NURSE MARKETPLACE THROUGH PRODUCT DEMONSTRATIONS, BUILDING BRAND IMAGE AND RECRUITMENT

Please use category numbers when filling out the Exhibit contract. A list of previous exhibitors can be found at www.NBNA.org

Behavioral Health ........................................(1) Insurance/Financial Investments ..........(8) Skin Care/Personal Care .........................(15)
Associations (Medical) ...............................(2) Laboratory/Pharmaceutical .................(9) State Nurses Associations ..................(16)
Information Technology .............................(3) Medical Equipment/Supplies ............(10) Staffing Agency .................................(17)
Consumer Goods (jewelry, travel, etc.) ..(4) Nursing Homes .....................................(11) Uniforms/Shoes/Clothing .....................(18)
Education/Research Programs .................(5) Nutrition/Food ....................................(12) Universities/Colleges/Schools .........(19)
Government Agencies ...............................(6) Publishers .........................................(13) Wound Care .................................(20)
Hospitals/Medical Centers .......................(7) Recruitment/Personnel .......................(14)

NBNA ATTENDEES ARE WELL EDUCATED:
- 64% were Masters prepared or higher
- 28% BSN only
- 13% APRN
- 4% RN or Associates

AND HIGHLY EXPERIENCED:
- 47% Nurse Clinicians
- 28% Nurse Educators
- 23% Nurse Administrators
- 13% APRNS
GENERAL INFORMATION

BOOTH RESERVATIONS DEADLINE
May 25, 2016
Booth Cost: $1,000 USD

EXHIBITOR SERVICES
The following services will be provided to each exhibitor:
• 8’ x 10’ exhibit booth
• One 6 foot table and two chairs
• 8’ high back drape and 3’ high side rail drape in show colors
• A standard identification sign showing exhibitor’s name and booth number
• Carpeting in all areas, including booth
• Daily cleaning of aisles in exhibit area
• Exhibit description in the conference souvenir program (if submitted by May 25)
• Security Guard service (24-hours)

EXHIBITOR BENEFITS
• Admission to the Opening Ceremony and educational sessions for booth personnel (does not include NBNA Business Meeting, Leadership Institute, President’s Gala or Sunday Brunch)
• Listing in the June NBNA Newsletter (Deadline, April 10, 2016)
• Advertising opportunity in the official souvenir program (See rate sheet page 13)
• Access to conference attendees by email blast (see page 9)

EXHIBITOR SERVICE KIT
Will contain rates for all labor, services, electrical connections, internet access, furniture, and miscellaneous equipment. The kit will be emailed upon receipt of signed contract and payment.

OFFICIAL DECORATING COMPANY: GES EXPOSITION SERVICES
You will receive the Exhibitors Show Kit by email directly from GES in April.

SHOW FLOOR TRAFFIC BUILDERS
EXCLUSIVE EXHIBIT HOURS Dedicated exhibit hours allow participants ample opportunity to meet with you to learn about your products and services.

FOOD FUNCTIONS To increase traffic, the exhibit hall is the site of a lunch on Thursday and a snack break on Friday. A great time to network with attendees.

DRAWINGS AND GIVEAWAY Drive traffic to your booth and gather important attendee leads with the NBNA EXHIBIT HALL PASSPORT TO PRIZES and raffles which will be held on Friday and Saturday! Winners must be present to win.

SECURITY AND LIABILITY
SECURITY WILL BE ON DUTY AT ALL TIMES.
EXHIBITOR hereby assumes entire responsibility and hereby agrees to indemnify and defend the NATIONAL BLACK NURSES ASSOCIATION, Sheraton Memphis Downtown and Memphis Cook Convention Center and the Hotel’s Owner, and their respective owners, managers, subsidiaries, affiliates, employees and agents against any claims or expenses arising out of the use of the exhibition premises.

EXHIBITOR shall obtain and keep in force during the term of the installation and use of the exhibit premises, policies of Comprehensive General Liability Insurance and Contractual Liability Insurance, insuring and specifically referring to the Contractual liability set forth in this Exhibit, in an amount not less than $1,000,000 Combined Single Limit for personal injury and property damage.

The Hotel, its owners, its operator, and the Sheraton Memphis Downtown and Memphis Cook Convention Center, shall be included in such policies as additional named insured’s. In addition, EXHIBITOR acknowledges that neither the Hotel, its owners, or its operator, maintain insurance covering exhibitor’s property and that it is the sole responsibility of EXHIBITOR to obtain business interruption and property damage insurance insuring any losses by EXHIBITOR.

BOOTH ASSIGNMENT
Assignments will be made upon receipt of the Exhibitor Registration Form and your payment in the order of which they are received. Every effort will be made to accommodate your preferred location. NBNA may, at its discretion, accept or reject any application for space and reserves the right to relocate or reassign exhibit booths at any time for the overall benefit of the conference.

EXHIBIT SCHEDULE
—EXHIBIT HOURS MAY CHANGE WITHOUT PRIOR NOTICE—

WEDNESDAY, AUGUST 3
12:00 noon - 6:00 pm Exhibit Set-Up

THURSDAY, AUGUST 4
8:00 am - 12:00 pm Exhibit Set-Up
1:00 pm - 5:00 pm Exhibit Hall Grand Opening
6:00 pm – 8:00 pm NBNA Opening Ceremony

FRIDAY, AUGUST 5
11:00 am - 3:00 pm Local Career Fair and Exhibits
Open for NBNA Members & Local Nurses

SATURDAY, AUGUST 6
11:00 am - 1:00 pm Exhibits Open
12:00 noon Passport Raffle
12:30 pm Grand Raffle
1:00 pm - 3:00 pm Exhibits Dismantle

TOTAL EXHIBIT HOURS: 10

In order to protect NATIONAL BLACK NURSES ASSOCIATION and the Sheraton Memphis Downtown and Memphis Cook Convention Center, Owner and each of such entity’s owners, parents, subsidiaries, affiliates, employees, officers, directors, and agents harmless against all claims, losses or damages to persons or property, governmental charges or fines and attorney’s fees arising out of or caused by its installation, removal, maintenance, occupancy or use of the exhibition premises or a part thereof, excluding any such liability caused by the sole gross negligence of Hotel and its employees and agents.

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GENERAL INFORMATION, CONTINUED

EXHIBIT BOOTHS ARE REQUIRED TO REMAIN OPEN AND STAFFED DURING THE SCHEDULED HOURS. If you anticipate an early departure, please advise the NBNA National Office Exhibit Coordinator as soon as possible.

PAYMENT

THERE ARE TWO WAYS TO REGISTER AND PAY

1. Mail registration form and check payment to the NBNA office.
2. Email your registration materials and purchase orders directly to NBNA. Be sure to retain a copy for your records.

You will receive confirmation by email.

Submit exhibit contract and payment by MAY 25. Checks should be made payable to NBNA, and mailed to:

Dianne Mance, Exhibitor Services, NBNA
8630 Fenton Street, Suite 330
Silver Spring, MD 20910

CANCELLATION

All exhibitors canceling space will be charged a $250 processing fee. All requests for refunds must be made in writing and received by the NBNA National Office before JUNE 19. Refunds will be issued 90 days after the conclusion of the conference. No refunds will be granted after JUNE 19. There is no refund for individual banquet or brunch tickets after JULY 1.

PLEASE NOTE

All requested information must be provided in order to insure that you receive confirmation for your exhibit space, receipts and event updates. GES Exhibitor Kit. GES is the official show decorator, please contact them regarding your shipping questions. The hotel will charge for shipping and receiving and delivery of all Exhibitor materials to the show floor.

CONFERENCE REGISTRATION

Registration for all attendees will begin on TUESDAY, AUGUST 2 at 3:00 pm on the Marquis Level Foyer of the Memphis Cook Convention Center. Attendees who registered in advance may check in at the registration desk and pick up all meeting materials, including badges, special session tickets and conference program. On-site registration and individual ticket purchases will end at 2:00 pm on THURSDAY, AUGUST 4.

WHAT TO WEAR

The attire is business casual.

THURSDAY, AUGUST 4

The Business Meeting (members only) is from 8:00 to 10:00 am. If you are an exhibitor and a NBNA member, you must pay the conference registration fee in order to attend NBNA Business Meetings. All exhibitors may attend educational sessions. The Opening Ceremony will begin promptly at 6:00 pm, all exhibitors are invited to attend.

FRIDAY, JULY 31

We will show our solidarity with women and heart health by wearing a red item of clothing or a red accessory.

HOTEL INFORMATION

HOTEL INFORMATION

SHERATON MEMPHIS DOWNTOWN
250 N. Main Street
Memphis, TN 38103

Starwood Central reservations 1-866-716-8106
The preferred method to reserve your hotel room is the dedicated booking website that has been created for NBNA by the Sheraton Memphis Downtown. https://www.starwoodmeeting.com/events/start.action?id=1510098538&key=2E27F4F or visit the NBNA website.

HOTEL DIRECT RESERVATIONS

This number will connect you with the Sheraton Central Reservation System. When calling in the guest should just ask for the National Black Nurses Association Conference.

ROOM REGISTRATION

Deadline date for making reservations at the Sheraton Memphis Downtown is 5:00pm ET, SUNDAY, JULY 11. After that date, reservations will be accepted on a space and rate availability basis. If the Group rate is not available, the Hotel’s rack rate will apply.

ROOM RATES

$148 USD for a single, double, triple or quadruple occupancy. The Sheraton Memphis Downtown will honor these rates 3 days pre- and post-conference. There is no additional charge for children under age 18 sharing with a parent using existing bedding. Sales and occupancy taxes of 15.95% will be applied on a daily basis.

CHECK IN: 3:00 PM / CHECK OUT: 12:00 PM

Late check out is complimentary, based on availability and should be requested 24 hours in advance. Check out 2:00 - 6:00 pm: charged additional half day; after 6:00 pm: charged additional day.

ROOM GUARANTEE

The Sheraton Memphis Downtown DOES NOT require the first night’s room and tax to be paid in advance to guarantee your reservation. You must provide a valid credit card when making reservation.

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AIRLINE TRAVEL

All major airlines have flights into the Memphis International Airport. Book early for the best rates! You may want to consider Frontier Airline when searching for your flight.

AIRPORT TRANSPORTATION

Shuttle will be the official shuttle service for Memphis International Airport. To book your reservation visit: www.supershuttle.com

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FRIDAY, JULY 31

We will show our solidarity with women and heart health by wearing a red item of clothing or a red accessory.
The National Black Nurses Association’s Annual Institute and Conference provides its conference attendees with a unique opportunity to network and explore career and educational advancement opportunities with over 120 of the most prestigious hospitals and the finest schools of nursing in the country. We want to thank you for making this possible by letting you know we have heard you and want to enhance your experience at the NBNA conference.

We are pleased to announce that we have expanded the exhibit hall hours on Friday, August 5, 2016 to make way for the Fourth Annual NBNA Career and Educational Fair which will be marketed to nurses in the Memphis major metropolitan areas prior to the conference. We know you want to connect with nurses who are on the move, ready to move and want to hear what you may have to offer. We realize that it is important for you to connect with the seasoned RN as well as the first year RN who is eager to grow in their nursing career. We also know you want to meet the RN or MSN who is ready to take the next step in their nursing education. Our goal is to continue to be the meeting of choice, the nurses conference where you will continue to meet the best and the brightest nurses from across the country and from the local markets. We will be asking attendees to come prepared to interview with resumes in hand!

The future of nursing is changing and NBNA will continue to be at the forefront of that change by providing our members and conference attendees the latest and best practices in nursing leadership, research, information technology, health care management, as well as educational and employment opportunities. We hope you will join us!

**SPONSORSHIP LEVELS**

NBNA sponsorships are designed to increase brand recognition by engaging and networking with our annual meeting attendees. The chart below outlines the additional benefits your company will receive with each sponsorship level.

<table>
<thead>
<tr>
<th>Sponsorship Levels and Benefits</th>
<th>DIAMOND $50,000 +</th>
<th>PLATINUM $49,999 - $20,000</th>
<th>GOLD $19,999 - $10,000</th>
<th>SILVER $9,999 - $5,000</th>
<th>BRONZE $4,999 - $1,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognition on supporter signage prominently displayed in select common areas</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Recognition in public relations materials</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Post conference edition of the NBNA On-line Newsletter</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Recognition in Conference updates on the website</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Corporate identification on event tickets as appropriate</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Recognition by the NBNA Leadership at the Opening Ceremony</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Verbal recognition at the sponsored event</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Company recognition on exhibit hall entrance unit</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Company logo on NBNA Conference website</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Recognition in Conference Souvenir Program Book</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>A VIP table for 10 at the Presidents Banquet ($1600 value)</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Complimentary full page advertisement in Conference Souvenir Program Book OR Complimentary exhibit booth ($2000 value)</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Complimentary full page advertisement in Conference Souvenir Program Book AND Complimentary exhibit booth ($1000 value)</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Complimentary Literature/Product insertion in conference bag ($500 value)</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Sponsor Ribbon at your exhibit booth</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>VIP Seating at the Opening Ceremony</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>An additional two tickets to the President’s Gala ($) (170 value)</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Complimentary conference registration for five individuals</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Complimentary conference registration for two individuals</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
</tbody>
</table>

All logos for printing must be an EPS, Adobe Illustrator or high quality PDF format.
# SPONSORSHIP OPPORTUNITIES AT-A-GLANCE

## EDUCATE

### CEU or Non-CEU Breakfast Sessions

Present a hot trend or state-of-the-art 60-minute breakfast presentation for 125 attendees. Abstracts are reviewed and session reserved on a first-come, first-served basis. Your sponsorship includes, hot plated breakfast for attendees, standard AV package, and marketing to the attendees prior to the conference. Sponsorship fee does not include expenses for the speaker.

*The cost: $8,000 Four (4) sessions are available. ITEM #2 BELOW*

### Nursing Innovation Theater CEU or Non-CEU Presentation

An exciting venue to promote nursing innovations across the health industries. Showcase your product and industry hottest trends or newest innovations in a one-hour presentation in the NBNA Nursing Innovation Theater for up to 125 attendees. Abstracts are reviewed and sessions are reserved on a first-come, first-served basis. Standard AV package and marketing to attendees prior to conference is included in the sponsorship. Sponsorship fee does not include expenses for the speaker.

*The cost: $2,500 Three (3) theater times are available. ITEM #8 BELOW*

## EVENT SPONSORSHIPS

<table>
<thead>
<tr>
<th>Item</th>
<th>Opportunity</th>
<th>Key Benefits</th>
<th>Investment</th>
<th>Quantity Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NBNA Board of Directors and Non-Member Local Nurses Networking Reception.</td>
<td>Event signage, speaking opportunity, promotional materials. Meet with NBNA Board, Members and first time attendees and potential local members, 100 guests</td>
<td>$5,000 / $1,250</td>
<td>sole sponsor shared (4)</td>
</tr>
<tr>
<td>2</td>
<td>CEU or NON-CEU Breakfast Session (60 minutes)</td>
<td>Event signage and table tents; your speaker, and promotional materials. Reach a target audience to receive specialized information on your latest product or program</td>
<td>$8,000</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>Continental Breakfast before the Business Meeting</td>
<td>Event signage and table tents; opportunity to welcome attendees at the buffet and foyer entrance; promotional materials dropped on tables, and logo napkins</td>
<td>$10,000</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>Exhibit Hall Lunch, Thursday, August 4</td>
<td>Event signage, table tents, Logo on the lunch box</td>
<td>$47,000</td>
<td>$10,000 / 5 shared</td>
</tr>
<tr>
<td>5</td>
<td>Exhibit Hall Snack Stations Thursday and Friday</td>
<td>Event signage and prepackaged snacks served from sponsors booth</td>
<td>$2,000 each</td>
<td>8 (4 per day)</td>
</tr>
<tr>
<td>6</td>
<td>NBNA Summer Youth Leadership Institute</td>
<td>Event signage during the program, opportunity to host the children at your School of Nursing or Health Facility</td>
<td>$10,000 Full Sponsor</td>
<td>$5000 / shared, 3 max.</td>
</tr>
<tr>
<td>7</td>
<td>NBNA Under Forty Forum</td>
<td>Event signage, network with some of the brightest emerging leaders in nursing. Engage in “speed mentoring” with NBNA Under 40 attendees</td>
<td>$7,000</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>NBNA Innovations Theater</td>
<td>An exciting venue to promote nursing innovations across the industries. Showcase your companies hottest trends and newest innovations! Event signage</td>
<td>$2,5000</td>
<td>3</td>
</tr>
<tr>
<td>9</td>
<td>NBNA Innovations Theater Box Lunch</td>
<td>Your name and logo will be on each box, table signage</td>
<td>$5,500</td>
<td>4</td>
</tr>
<tr>
<td>10</td>
<td>NBNA Innovations Theater Break Station</td>
<td>Signage at food station</td>
<td>$3,000</td>
<td>4</td>
</tr>
<tr>
<td>11</td>
<td>NBNA Presidents’ Leadership Institute</td>
<td>Event signage, sponsored speaker, promotional materials</td>
<td>$10,000</td>
<td>2</td>
</tr>
<tr>
<td>12</td>
<td>NBNA CEU Institutes. 4 hour program</td>
<td>Event signage, 1 hour sponsored speak(s)</td>
<td>$10,000 (sole)</td>
<td>multiple</td>
</tr>
<tr>
<td>13</td>
<td>NBNA CEU Institutes. 4 hour program</td>
<td>Event signage, 1 hour sponsored speak(s)</td>
<td>$5,000 (shared)</td>
<td>multiple</td>
</tr>
<tr>
<td>14</td>
<td>Career Fair for Local Students and Non-Member Nurses</td>
<td>Recruitment opportunity for local potential hires; logo and company name on bag and neck wallet</td>
<td>$500 Neck wallet Badge Holder</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Career Fair for Local Students and Non-Member Nurses</td>
<td>Recruitment opportunity for local potential hires; logo and company name on bag and neck wallet</td>
<td>$1,000</td>
<td>Tote Bag</td>
</tr>
<tr>
<td>16</td>
<td>Career Fair Innovation Theater</td>
<td>Event signage, an exciting venue to promote nursing innovations across the industries. Showcase your companies hottest trends and newest innovations</td>
<td>$2,500</td>
<td>1</td>
</tr>
<tr>
<td>17</td>
<td>Corporate Table for the Institute of Excellence Awards Luncheon</td>
<td>Invite your companies employees or colleagues to celebrate and honor nursing's outstanding leaders</td>
<td>$1,500 / Table for 10</td>
<td>Multiple</td>
</tr>
<tr>
<td>18</td>
<td>Corporate Table for The President’s Banquet</td>
<td>Invite your companies employees or colleagues to celebrate and honor NBNA’s outstanding leaders</td>
<td>$1,600 / Table for 10</td>
<td>Multiple</td>
</tr>
</tbody>
</table>

All logos for printing must be an EPS, Adobe Illustrator or high quality PDF format.
## PROMOTIONAL SPONSORSHIPS

<table>
<thead>
<tr>
<th>Item</th>
<th>Opportunity</th>
<th>Key Benefits</th>
<th>Investment</th>
<th>Quantity Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>Conference Bags</td>
<td>Company name and logo on 1200 NBNA bags</td>
<td>$7,000</td>
<td>1</td>
</tr>
<tr>
<td>20</td>
<td>Conference neck wallet style badge holder</td>
<td>Company Name and logo on 1200 NBNA badge holders</td>
<td>$7,000</td>
<td>1</td>
</tr>
<tr>
<td>21</td>
<td>Conference Bag Insert, Literature/Product</td>
<td>1200 attendees will receive your product</td>
<td>$500 per item</td>
<td>multiple</td>
</tr>
<tr>
<td>22</td>
<td>Water Bottles</td>
<td>Company logo on 1200 water bottles</td>
<td>$5,000</td>
<td>1</td>
</tr>
<tr>
<td>23</td>
<td>Cyber Cafe Thursday, Friday, Saturday and Sunday</td>
<td>Kiosk will have company name and logo, and screen saver on the computer for 4 days</td>
<td>$2,500</td>
<td>4</td>
</tr>
<tr>
<td>24</td>
<td>Directional Signage</td>
<td>Signage with your company logo and name will guide attendees throughout the conference</td>
<td>$1,000</td>
<td>One meter / one sided</td>
</tr>
<tr>
<td>25</td>
<td>Directional Signage</td>
<td>Signage with your company logo and name will guide attendees throughout the conference</td>
<td>$1,500</td>
<td>One meter / two sided</td>
</tr>
</tbody>
</table>

## ADDITIONAL UNRESTRICTED EDUCATIONAL GRANT OPPORTUNITIES

<table>
<thead>
<tr>
<th>Item</th>
<th>Opportunity</th>
<th>Key Benefits</th>
<th>Investment</th>
<th>Quantity Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>Plenary Sessions / Thursday, Aug. 4 &amp; Saturday, Aug 6</td>
<td></td>
<td>$10,000</td>
<td>2</td>
</tr>
<tr>
<td>27</td>
<td>Presidents’ Leadership Institute</td>
<td></td>
<td>$10,000</td>
<td>1</td>
</tr>
<tr>
<td>28</td>
<td>Institutes (4 hour intensive educational sessions)</td>
<td></td>
<td>$5,000</td>
<td>8</td>
</tr>
<tr>
<td>29</td>
<td>Workshops (2 hour intensives)</td>
<td></td>
<td>$3,500</td>
<td>4</td>
</tr>
</tbody>
</table>

## NBNA AWARDS

<table>
<thead>
<tr>
<th>Item</th>
<th>Opportunity</th>
<th>Key Benefits</th>
<th>Investment</th>
<th>Quantity Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>NBNA Presidential Awards: 3 Lifetime Achievement Awards and 3 Trail Blazer Awards</td>
<td></td>
<td>$400 each</td>
<td>6</td>
</tr>
<tr>
<td>31</td>
<td>NBNA Nurse of the Year Awards (9)</td>
<td></td>
<td>$2,000</td>
<td>1</td>
</tr>
</tbody>
</table>

## DR. LAURANNE SAMS SCHOLARSHIP

<table>
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<tr>
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<th>Opportunity</th>
<th>Key Benefits</th>
<th>Investment</th>
<th>Quantity Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>32</td>
<td>Your donation will provide tuition assistance to a deserving NBNA student member</td>
<td>A special recognition in program, may present scholarship to winner, tax deductible</td>
<td>$1,000 increments</td>
<td>Multiple</td>
</tr>
<tr>
<td>33</td>
<td>Create a scholarship in the name of your organization or in honor of a nursing icon</td>
<td>A special recognition in program, may present scholarship to winner, tax deductible</td>
<td>$5,000 minimum</td>
<td>Multiple</td>
</tr>
</tbody>
</table>

## EMAIL BLAST

Promote products, services, or an upcoming program through an e-mail advertisement. Highlight a program that you are sponsoring during the NBNA conference. NBNA will send your one-page flyer to registered attendees. You may include the link to a designated webpage. One email between June 1 and September 30, 2016.

**Cost to advertise:** $1,000 (10 available)

To confirm your advertisement, please use the Conference Program Book Advertising Insertion Form on page 13 or the Passport Insertion Order Form on page 14.

*Please send the advertisement as follows: Image file (jpeg, or png, in 800 pixels wide by any length.)*

All logos for printing must be an EPS, Adobe Illustrator or high quality PDF format.
CONFERENCE SPONSORSHIP FORM

Exhibiting Company Information: ___________________________________________________________

COMPANY NAME: _______________________________________________________________________

CONTACT NAME: _______________________________________________________________________

ADDRESS: ___________________________________________________________________________

CITY: ________________________________________________________________________________ STATE: ________________ ZIP: ________________

PHONE: ______________________________________________________________________________ FAX: __________________________________________________________________________

E-MAIL: ____________________________________________________________________________

SPONSORSHIP LEVEL:                  ☐ DIAMOND $50,000 +                  ☐ PLATINUM $49,999 - $20,000
☐ GOLD $19,999 - $10,000                  ☐ SILVER $9,999 - $5,000                  ☐ BRONZE $4,999 - $1,000

SPONSORSHIP OPPORTUNITIES:

<table>
<thead>
<tr>
<th>ITEM #</th>
<th>DESCRIPTION</th>
<th>YOUR INVESTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>______</td>
<td>___________</td>
<td>_______________</td>
</tr>
<tr>
<td>______</td>
<td>___________</td>
<td>_______________</td>
</tr>
<tr>
<td>______</td>
<td>___________</td>
<td>_______________</td>
</tr>
</tbody>
</table>

All logos for printing must be an EPS, Adobe Illustrator or high quality PDF format.

PAYMENT INFORMATION
(NBNA accepts only MasterCard and Visa Credit Cards)

PAYMENT TYPE: ☐ Check (Payable to NBNA) ☐ MasterCard ☐ Visa Amt. Enclosed: _______________________

Credit Card #: __________________________ Exp. Date: __________________

Cardholder Name (please type or print): __________________________________________________________ Security code: __________________

Signature __________________________________________________________________________________

AS IT APPEARS ON THE CARD

ALLOW 10 DAYS PROCESSING TIME IF PAYING BY CHECK.

EMAIL, MAIL OR FAX COMPLETED FORM TO:
NBNA Exhibitor Coordinator • 8630 Fenton Street, Suite 330 • Silver Spring, MD 20910
Fax: 301-589-3223 • dmance@nbna.org
Please PRINT or TYPE the following information:

ORGANIZATION:__________________________________________________________________________________________

PHONE: __________________ FAX: ________________________________________________________________

E-MAIL: ________________________________________________________________________________________________

BILLING ADDRESS: _______________________________________________________________________________________

CITY: __________________ STATE: ______________ ZIP: __________________________________________________________

CONTACT NAME: __________________ TITLE: __________________

DATE SUBMITTED: ____________________________

Type of Product/Service: __________________________ (Use corresponding number listed inside EXHIBITOR PROSPECTUS) __________________________

Booth Space Preferences: _______ First Choice _______ Second Choice _______ Third Choice

Hotel Accommodations: ☐ Yes (please complete HOUSING FORM) Estimated No. of Rooms Needed ________ ☐ No

NBNA MEMBERS: If you wish to participate in the business meeting and vote, you must register for the entire Conference. Please complete and submit the NBNA Conference Registration Form.

BOOTH ASSIGNMENTS ARE ON A FIRST COME - FIRST PLACED BASIS!! EXHIBIT RENTAL SPACE IS $1000. DEADLINE FOR SIGNED CONTRACT AND PAYMENT IS MAY, 26. EXHIBITS WILL BE DISPLAYED AUGUST 4 - 6, 2016.

Payment Type: ☐ Check ☐ MasterCard ☐ Visa

Credit Card #: __________________________________________ Exp. Date: __________________

Cardholder Name (please type or print): __________________________ Security code: __________________

Signature ______________________________________________________________________________________________

Make check payable to: National Black Nurses Association, Inc.
8630 Fenton Street, Suite 330
Silver Spring, MD 20910
301.589.3200
FAX: 301.589.3223

NOTE: If you do not receive confirmation of your booth reservation within 15 days from your submission date, please contact the office immediately to confirm receipt of your contract and payment.

Submit exhibit contract and payment by May 26, 2016. Payment must be sent with registration form to secure booth space. If space rental fee is not paid according to contract schedule, it may be re-assigned to another exhibitor at the option of NBNA.

Program exhibitor index listing: In fifty words or less, describe exactly what you want to appear in the Conference Souvenir Program. Include the products or services to be exhibited. **Deadline for inclusion in the program is May 26, 2016. Exhibitor index listing MUST BE Emailed in Word format to: dmance@nbna.org**

---

OFFICIAL NBNA USE ONLY:

PAYMENTS: ________________________________________________________________

ID# __________________ Approved Booth # __________ Date __________ Check # __________ Amount __________
There are many palliative care teams across the US being led by APNRS and they are key team members who exemplify commitment to their varied roles in not only leadership, but practice, education and research. Participants of this course will receive advanced education in pain and symptom assessment/management and communication. Additional training in palliative care-related finances, budgets, quality improvement, education and leadership are also provided. AACN and City of Hope ELNEC faculty will serve as trainers for this advanced course.

Here are a few of the ELNEC APRN Modules:

- Communication between APRN and Physicians
- Pain Management
- Symptom Management
- Program Development and Maintenance
- Palliative APRN Role Development and Clinical Leadership
- Self Care - How Do You Care For Yourself
- Leadership

Who Can Attend:

MSN, PhD, DNP. Certified Registered Nurse Anesthetists, Clinical Nurse Specialists and Certified Nurse Practitioners who are clinically focused. Nursing students in any of these graduate Programs are also welcome to attend. APRNs from a wide variety of clinical settings are invited to participate.

What is Provided With Completion of Course:

An ELNEC APRN Certificate 14 CEs
500+ page Syllabus ELNEC APRN CD

APRN CEs will be provided by VITAS Continuing Education Department. To receive CEs and a certificate of completion, you must attend the entire 2-day course.

SPACE IS LIMITED, PLEASE REGISTER EARLY

PLEASE PRINT CLEARLY OR TYPE. ONE REGISTRATION PER FORM. COPY FORM FOR MULTIPLE REGISTRATIONS.

NAME ________________________________________ CREDENTIALS _______________________________

FIRST MIDDLE LAST MUST PROVIDE

ADDRESS _______________________________________________________________________________________________________________

CITY __________________________________________________________________ STATE ___________ZIP _____________________________

HOME PHONE (_______) ___________________________________E-MAIL ________________________________________________________

JOB TITLE ___________________________________PLACE OF EMPLOYMENT _____________________________________

ADDRESS OF EMPLOYMENT ______________________________________________________________________________________

WORK PHONE (_______) _____________________________ FAX (_______) _____________________________________________

NBNA ID #  ______________________________________________________________RN/LPN/LVN LIC . NO. ______________________________

NAME OF CHAPTER (REQUIRED INFO): _______________________________________________________________________________________

EMERGENCY CONTACT: ___________________________________PHONE _______________________________________

☐ I AM A DIRECT MEMBER (do not belong to a chapter) ARE YOU A NURSE PRACTITIONER? ☐ YES ☐ NO

REGISTRATION FEES

☐ I have registered for the full conference, please register me for this program

☐ I am a NBNA member registering for the 2day Training only ($400)

☐ I am not a NBNA member registering for the 2day Training only ($500)

YOU MUST PROVIDE A COPY OF YOUR ADVANCED DEGREE IN NURSING.

PAYMENT INFORMATION (NBNA ACCEPTS ONLY MASTERCARD AND VISA CREDIT CARDS.)

☐ Check Enclosed ☐ Check has been requested/ PO# ___________________________ ☐ Money Order ☐ MasterCard ☐ VISA

Credit Card # ___________________________ Exp. Date: __________ Sec. Code: ___________________________

Cardholder Name (please type or print): _______________________________________________________________________________________

Signature ________________________________________________________________

(ALLOW 2 WEEKS PROCESSING TIME IF PAYING BY CHECK)
BADGE REQUEST FORM

ORGANIZATION/COMPANY CONTACT INFORMATION

Please PRINT or TYPE the following information:

Organization: ___________________________________________________________________________________________________________________________
Phone: ___________________________ FAX : ___________________________  
E-mail: ___________________________  
Billing Address: _________________________________________________________________________________________________________________________
City: ___________________________ State: _______________ Zip: ___________________________
Contact Name: ____________________________________________________________________Title: _________________________________________________

There will be a charge of $25 per person for more that 4 booth personnel per $1000 booth. 
Please provide the names of the individuals who will staff your booth. 
Use REGISTRATION & CONTRACT form to pay for additional booth staff. 
BADGES WILL NOT BE PRINTED IF NAMES ARE NOT LEGIBLE!
PLEASE DO NOT SEND THIS FORM UNTIL YOU HAVE CONFIRMED THE NAMES OF THE PERSONS WHO 
WILL BE WORKING IN YOUR BOOTH.

Name: _____________________________________________________________ City ____________________________State ________ Zip ____________________
Company: ______________________________________________________________________________________________________________________________
Email: ______________________________________________________________________________________________________________________________

Name: _____________________________________________________________ City ____________________________State ________ Zip ____________________
Company: ______________________________________________________________________________________________________________________________
Email: ______________________________________________________________________________________________________________________________

Name: _____________________________________________________________ City ____________________________State ________ Zip ____________________
Company: ______________________________________________________________________________________________________________________________
Email: ______________________________________________________________________________________________________________________________

Name: _____________________________________________________________ City ____________________________State ________ Zip ____________________
Company: ______________________________________________________________________________________________________________________________
Email: ______________________________________________________________________________________________________________________________

EMAIL, MAIL OR FAX COMPLETED FORM TO:
NBNA Exhibitor Coordinator • 8630 Fenton Street, Suite 330 • Silver Spring, MD 20910
Fax: 301-589-3223 • dmance@nbna.org
**PROGRAM BOOK ADVERTISING OPPORTUNITIES**

(PLEASE PHOTOCOPY THIS DOCUMENT FOR MULTIPLE ADS)

ADVERTISER/CLIENT NAME: ____________________________________________________________

AD AGENCY (COMPANY) NAME: _______________________________________________________________________________________

CONTACT NAME: _______________________________________________________________________________________

ADDRESS: _______________________________________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________________________

PHONE: _______________________________________________________________________________________

FAX: _______________________________________________________________________________________

E-MAIL: _______________________________________________________________________________________

**PAYMENT DUE BY MAY 1, 2016 • PREPAYMENT IS REQUIRED**
—NBNA accepts only MasterCard and Visa Credit Cards—

Contact Name: _____________________________________________________________________________

Contact E-Mail: _____________________________________________________________________________

**PAYMENT TYPE:**  
- Check (Payable to NBNA)  
- MasterCard  
- Visa  

**Amt. Enclosed:** ___________________________  
**Credit Card #** ___________________________  
**Exp. Date:** ___________________________

**Cardholder Name (please type or print):** ________________________________________________________  
**Security code:** ___________________________

**Signature** ____________________________________________________________

**AS IT APPEARS ON THE CARD**

ALLOW 10 DAYS PROCESSING TIME IF PAYING BY CHECK.

**FAX OR EMAIL:** Fax: 301-589-3223 / Email: dmance@nbna.org

To mail this application and all advertising materials forward to Dianne Mance,  
NBNA, 8630 Fenton Street, Suite 330, Silver Spring, MD 20910, Phone: 301.589.3200

---

**BLACK & WHITE OR COLOR ADS**

Email high resolution: 300 DPI files: JPG or PDF

**ALL ADVERTISING FEES ARE GROSS**

INDICATE AD SIZE REQUEST WITH ✔ IN CHART.

<table>
<thead>
<tr>
<th>✔</th>
<th>DESCRIPTION</th>
<th>COST</th>
<th># AVAIL.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inside Front Cover (Color)</td>
<td>$1500</td>
<td>1 ONLY</td>
<td></td>
</tr>
<tr>
<td>Inside Back Cover (Color)</td>
<td>$1500</td>
<td>1 ONLY</td>
<td></td>
</tr>
<tr>
<td>Outside Back Cover (Color)</td>
<td>$1700</td>
<td>1 ONLY</td>
<td></td>
</tr>
<tr>
<td>Belly Band</td>
<td>$2000</td>
<td>1 ONLY</td>
<td></td>
</tr>
<tr>
<td>2 Page Color Spread</td>
<td>$2500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Page Black &amp; White 10”H x 7.5”W w/bleed: 11.25”H x 8.75”W (live area 10 x 7.5)</td>
<td>$1000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Page Color 10”H x 7.5”W w/bleed: 11.25”H x 8.75”W (live area 10 x 7.5)</td>
<td>$1300</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/2 Page Ad Black &amp; White 4.875”H x 7.5”W</td>
<td>$600</td>
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<td></td>
</tr>
<tr>
<td>1/2 Page Color 4.875”H x 7.5”W</td>
<td>$800</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/4 Page Black &amp; White 4.875”H x 3.675”W</td>
<td>$325</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/4 Page Color 4.875”H x 3.675”W</td>
<td>$475</td>
<td></td>
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</tr>
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**ADVERTISE IN THE NBNA CONFERENCE SOUVENIR PROGRAM**

This book is every attendee’s invaluable companion for the duration of the annual meeting. All meeting activities are listed by and times, room numbers and convention maps. Exhibitors are listed alphabetically with booth number, product description and the floor plan. The full color, guide is distributed to all attendees when they pick up their registration materials.

**DEADLINES:**  
- Ad space reservations — April 15, 2016 by fax or email  
- Ad copy — May 26, 2016 by email only

**ALL LOGOS FOR PRINTING MUST BE AN EPS, ADobe Illustrator OR HIGH QUALITY PDF FORMAT.**

---

**PROGRAM BOOK ADVERTISING OPPORTUNITIES**

(PLEASE PHOTOCOPY THIS DOCUMENT FOR MULTIPLE ADS)

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AD AGENCY (COMPANY) NAME: _______________________________________________________________________________________

CONTACT NAME: _______________________________________________________________________________________

ADDRESS: _______________________________________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________________________

PHONE: _______________________________________________________________________________________

FAX: _______________________________________________________________________________________

E-MAIL: _______________________________________________________________________________________

**INSERTION ORDER#:** ___________________________  
**PO#:** ___________________________

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Contact Name: _____________________________________________________________________________

Contact E-Mail: _____________________________________________________________________________

**PAYMENT TYPE:**  
- Check (Payable to NBNA)  
- MasterCard  
- Visa  

**Amt. Enclosed:** ___________________________  
**Credit Card #** ___________________________  
**Exp. Date:** ___________________________

**Cardholder Name (please type or print):** ________________________________________________________  
**Security code:** ___________________________

**Signature** ____________________________________________________________

**AS IT APPEARS ON THE CARD**

ALLOW 10 DAYS PROCESSING TIME IF PAYING BY CHECK.

**FAX OR EMAIL:** Fax: 301-589-3223 / Email: dmance@nbna.org

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NBNA, 8630 Fenton Street, Suite 330, Silver Spring, MD 20910, Phone: 301.589.3200

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**Exp. Date:** ___________________________

**Cardholder Name (please type or print):** ________________________________________________________  
**Security code:** ___________________________

**Signature** ____________________________________________________________

**AS IT APPEARS ON THE CARD**

ALLOW 10 DAYS PROCESSING TIME IF PAYING BY CHECK.

**FAX OR EMAIL:** Fax: 301-589-3223 / Email: dmance@nbna.org

To mail this application and all advertising materials forward to Dianne Mance,  
NBNA, 8630 Fenton Street, Suite 330, Silver Spring, MD 20910, Phone: 301.589.3200

---
2016 PASSPORT ADVERTISEMENT

The deadline to sign up for the PASSPORT sponsorship is MAY 15!
We will not be able to provide extensions past the deadline.

COMPANY NAME:________________________________________________________________________________________________________________________
CONTACT NAME: ____________________________________________________________TITLE : _______________________________________________________
ADDRESS : ______________________________________________________________________________________________________________________________
CITY:  ______________________________________________________________STATE:  ________________ZIP : _________________________________________
PHONE:  ___________________________________________________________ FAX : _______________________________________________________________
EMAIL:  ________________________________________________________________________________________________________________________________

PAYMENT TYPE:  ❑ Check (Payable to NBNA)  ❑ MasterCard  ❑ Visa  Amt. Enclosed: _______________________________________
Credit Card # ___________________________________________________________ Exp. Date: ____________________________
Cardholder Name (please type or print): _______________________________________________________Security code: ____________________
Signature  _______________________________________________________________________________________________________________

AS IT APPEARS ON THE CARD

RETURN TO: DIANNE MANCE  phone 301-589-3200 • fax 301-589-3223 • email: dmance@nbna.org
National Black Nurses Association • 8630 Fenton Street, Suite 330 • Silver Spring, MD 20910

ATTENDEES PARTICIPATION
All registered attendees will receive a PASSPORT and a PASSPORT RAFFLE TICKET when they receive their registration materials. Instructions on how to use the passport and qualify for the PASSPORT RAFFLE to win popular electronic devices will be outlined on page one of the passport and in the conference souvenir program book. A final listing of the prizes will be included on the instruction page in the conference program book and posted at the “Custom Agent’s” station.

NOTE: To qualify to enter the PASSPORT RAFFLE attendees must obtain a minimum of 45 stamps INCLUDING each participating company that has advertised in the passport. The Customs Agent will inspect the passports to verify that all of the 45 squares have been stamped. The passport will be stamped “COMPLETE” by the Customs Agent. The attendee will deposit the PASSPORT RAFFLE TICKET in the drum.

EXHIBITORS PARTICIPATION
Upon receipt of your conference materials, a booth representative should stop at the Customs Passport desk to receive several self inking stamps. Stamps will be distributed based on the number of staffers in the booth. Please stamp attendee passport one time.

PASSPORT ADVERTISING OPPORTUNITY
Joining in the fun is so easy! An online statement, logo, or short paragraph designed to entice the conference attendees to visit your booth are offered to you at reasonable prices. You may want to include in your ad an opportunity to stop by your booth to register for a gift, gift certificate, or recharge their cell phones while they visit with you. 1000 attendees will have passports in their hands while in the exhibit hall. All ads are in full color.

LOGO SPECIFICATIONS: All logos for printing must be an EPS, Adobe Illustrator or high quality PDF format.
NBNA NURSING INNOVATIONS THEATER REGISTRATION

Register today for our newest addition to the NBNA exhibit area NBNA Nursing Innovations Theater, an exciting venue to promote nursing innovations across health industries. Showcase your company or organization’s hottest trends or newest innovations! If you are in the business of education, medical simulation, health information technology, wound care, infusion therapy, patient transport and many others, the NBNA Nursing Innovations Theater is for you!

Theater Dates and Times (Time slots subject to availability)

**FRIDAY, AUGUST 5 / 12:00 PM - 3:00 PM**
Beale Street Theater seating capacity 125

**SATURDAY, AUGUST 6 / 11:00 AM - 12:00 PM**
Beale Street Theater seating capacity 125

**SPONSOR BENEFITS**
- Seating for 125 attendees, 8 x 12 stage, seating for 2 presenters on stage, corporate signage, stage décor
- Audio visual equipment will include: screen, LCD projector, podium microphone
- Pre-conference promotion by NBNA on website and Facebook
- Pre-conference registration for attendees
- Marquis Listing in Program Book

NBNA will provide a drawing for one complimentary conference registration for the 2016 Conference for each of the theater presentations. Sponsors are free to provide an approved incentive to attendees.

Your choices are:
- Book for one hour @ $2,500 per hour
- Book multiple hours @ $2,500 per hour
- Provide CEUs for those attending your show. (You must complete the *Call for Abstracts form.*)

**PAYMENT INFORMATION**

**TYPE OF PRODUCT OR SERVICE**
- Presentation:_________________________
- Lecture/discussion:____________________
- Video:_______________________________
- Demonstration:_______________________
- Other:_______________________________

- [ ] CEU Presentation
- [ ] Non CEU Presentation

Please describe: _______________________

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**FRIDAY, AUGUST 5 - BEALE STREET THEATER**

<table>
<thead>
<tr>
<th>Show Time</th>
<th>Duration</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:30 pm - 1:30 pm</td>
<td>1 hour</td>
<td>$2,500</td>
</tr>
<tr>
<td>2:00 pm - 3:00 pm</td>
<td>1 hour</td>
<td>$2,500</td>
</tr>
</tbody>
</table>

TOTAL HOURS _____ TOTAL AMOUNT $_______

**SATURDAY, AUGUST 6 - BEALE STREET THEATER**

<table>
<thead>
<tr>
<th>Show Time</th>
<th>Duration</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00 am - 12:00 pm</td>
<td>1 hour</td>
<td>$2,500</td>
</tr>
</tbody>
</table>

TOTAL HOURS _____ TOTAL AMOUNT $_______

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**PAYMENT INFORMATION** (NBNA accepts only MasterCard and Visa Credit Cards)

**NAME:** ____________________________________________ **COMPANY:** ____________________________________________

**ADDRESS:** ____________________________________________ **CITY:** __________________________ **STATE:** ________ **ZIP:** __________________________

**PHONE:** __________________________ **FAX:** __________ **E-MAIL:** __________________________

**PAYMENT TYPE:** [ ] Check (Payable to NBNA) [ ] MasterCard [ ] Visa **Amt. Enclosed: __________________________**

Credit Card #: __________________________ **Exp. Date:** __________________________

Cardholder Name (please type or print): __________________________ **Security code:** __________________________

Signature __________________________

**RETURN TO:** DIANNE MANCE

phone 301-589-3200 • fax 301-589-3223 • email: dmance@nbna.org
National Black Nurses Association • 8630 Fenton Street, Suite 330 • Silver Spring, MD 20910
ANCILLARY EVENT SPACE APPLICATION

44th Annual Institute and Conference • August 2 - 6, 2016

ANCILLARY EVENTS INCLUDE:
Non-CEU Programs, Advisory Board meetings, Focus Groups/Market Research Meetings and Corporate Staff Meetings. All ancillary events must receive NBNA authorization whether they are requesting meeting space or holding an event off premises. No space will be guaranteed until confirmed in writing by NBNA. Notification of approval of your event will be forwarded to the venue.

BLACKOUT TIMES:
Organizations may not hold programs during these events.
CEU Sessions, Exhibit Hall Hours, NBNA Business Meetings, NBNA Opening Ceremony, NBNA President’s Banquet and NBNA Closing Brunch. (See attached Schedule of Events.) Please contact us if you have questions.

Company/Agency Requesting Meeting Space: ________________________________________________________________

My Company/Agency is a confirmed exhibitor: □ YES □ NO

Key Contact Person: ___________________________________________ Title: _______________________________________

Address: __________________________________________________________________________________________________

City: ___________________________________________ State: __________  Zip: _______________________________________

Phone: _________________________________________  FAX : ______________________________________________________

E-mail: _________________________________________________________________________________________________

Function Type: ___________________________________ Topic/Title of Non-CEU Program: ________________________________

Number of people: _________  □ Meeting Room  □ Off-site

ANCILLARY EVENT RATES: (Fee includes: Insert for conference bag, all inserts must be approved in advance by May 1, 2016.)
This fee does not include: Audio visual equipment, distribution of promotional materials by mailing list.

Confirmed Exhibitor: $1,500    Non-Exhibitor: $2,500

Payment Type: □ Check  □ MasterCard □ Visa

Credit Card #: ____________________________________________________________________________ Exp. Date: ______________________

Cardholder Name (please type or print): ______________________________________________________ Security code: ____________

Signature  _______________________________________________________________________________________________________________

Approved by: ____________________________________________________ Date: ______________________

Dianne Mance

MAIL OR FAX COMPLETED FORM TO:
Dianne Mance • 8630 Fenton Street, Suite 330 • Silver Spring, MD 20910
Email: dmance@nbna.org • Phone: 301-589-3200 • Fax: 301-589-3223
NBNA RULES OF ENGAGEMENT AT THE NBNA INSTITUTE AND CONFERENCE

1. Sessions start on time.
2. You can get a CEU certificate upon completion of the class in its entirety and by submitting an evaluation form. The evaluation form is provided to you at the BEGINNING of the class.
3. If you arrive more than 15 minutes after the start of the sessions, you will NOT receive a CEU certificate.
4. If you arrive more than 15 minutes after the start of the sessions, you CAN receive a CERTIFICATE OF ATTENDANCE.
5. You must stay in the room during the entire session in order to receive your CEU or CERTIFICATE OF ATTENDANCE.
6. You cannot switch sessions.
7. You cannot receive a certificate for less than the hours scheduled.
8. If you do not get the CEU certificate on the day of the session, you will not get a certificate. You cannot come the next day to pick up your certificate. You must stay the entire time to get a CEUs.
9. The NBNA National Office staff does not have CEU evaluation forms or CEU certificates. You must get those from the Cedars Sinai Department of Nursing staff who are on site at the NBNA Conference.
10. There are no CEUs for Opening Ceremony.
11. Treat NBNA staff, paid support staff, volunteers, exhibitors and hotel staff with respect.
12. Bring your business card and resume to share with sponsors, exhibitors and speakers.
13. The attire is business.
14. Do not place your CEU certificate in your conference book or bag.
15. If you are an exhibitor and also a member of NBNA, you must pay the conference registration fee if you which to attend the NBNA Business Meeting.
16. If you are a speaker and also a member of NBNA, you must pay the speaker registration fee if you which to attend the NBNA Business Meeting.

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**2016 CONFERENCE SCHEDULE AT-A-GLANCE**

**SUNDAY, JULY 31**
- 2:00 pm - 5:00 pm  Bag Stuffing

**TUESDAY, AUGUST 2**
- 9:00 am - 1:00 pm  Local Chapter Health Fair
- 2:00 pm - 4:00 pm  Board of Directors Meeting
- 3:00 pm - 7:00 pm  Registration
- 4:30 pm - 5:30 pm  Moderators/Monitors Workshop

**WEDNESDAY, AUGUST 3**
- 7:00 am - 5:00 pm  Registration
- 8:00 am - 12.00 pm  American Red Cross Workshop
- 8:00 am - 12:00 pm  Advances in Wound Therapy Workshop (4 CEUs)
- 8:00 am - 3:00 pm  Presidents’ Leadership Institute (CEUs TBD)
- 7:30 am - 6:00 pm  ELNEC - Advanced Practice Registered Nurse (APRN) Training
- 8:00 am - 6:00 pm  Youth Mental Health First Aid USA (8 CEUs)
- 1:00 pm - 5:00 pm  Caribbean Exploratory Research Workshop (4 CEUs)
- 1:00 pm - 5:00 pm  Difficult Ostomies and Fistulas Workshop (4 CEUs)
- 3:30 pm - 4:30 pm  Credentialing
- 3:30 pm - 4:30 pm  New Members/First time attendees Workshop
- 3:30 pm - 5:00 pm  Chapter Development Workshop
- 4:30 pm - 5:30 pm  Moderators / Monitors Workshop
- 5:00 pm - 6:00 pm  New Members/First Time Attendees Workshop and Networking Reception

**THURSDAY, AUGUST 4**
- 6:00 am - 7:00 am  Exercise Class
- 7:00 am - 5:00 pm  Registration
- 8:00 am - 10:00 am  Business Meeting (Chartering of new Chapters)
- 10:00 am - 4:30 pm  ELNEC - Advanced Practice Registered Nurse (APRN) Training-Part 2 (Total of 14 CEUs)
- 10:30 am - 12:30 pm  Plenary Session (2 CEUs)
- 10:30 am - 3:00 pm  Mindfulness Workshop
- 1:00 pm - 5:00 pm  Exhibit Hall Grand Opening, refreshments served
- 3:00 pm - 5:00 pm  Chapter Line-Up
- 5:00 pm - 6:00 pm  Opening Ceremony

**FRIDAY, AUGUST 5**
- 6:00 am - 7:00 am  Exercise Class
- 6:30 am - 7:45 am  Breakfast (2 sessions; CEUs to be determined)
- 7:00 am - 5:00 pm  Registration
- 8:00 am - 12:00 pm  Institutes (Select one of six sessions; 4 CEUs)
- 8:00 am - 12:00 pm  Emerging Leaders Forum
- 8:00 am - 4:00 pm  NBNA Summer Youth Enrichment Institute
- 11:00 am - 3:00 pm  Career Fair
- 11:00 am - 3:00 pm  Exhibit Hall, Raffle and Refreshments
- 12:30 pm - 3:00 pm  NBNA Nursing Innovations Theater (CEUs TBD)
- 12:30 pm - 2:30 pm  45th Anniversary Awards Luncheon
- 3:30 pm - 4:30 pm  Plenary Session (1 CEU)
- 4:30 pm - 6:30 pm  Under Forty Forum
- 5:00 pm - 7:00 pm  NBNA Choir Rehearsal

**SATURDAY, AUGUST 6**
- 6:00 am - 7:00 am  Exercise Class
- 6:30 am - 7:45 am  Breakfast Sessions (2 sessions, CEUs TBD)
- 8:00 am - 10:00 am  Business Meeting (chapter awards)
- 9:00 am - 1:00 pm  Mindfulness Workshop
- 10:00 am - 10:30 am  Candidates Forum
- 10:30 am - 11:00 am  Members Speaks
- 11:00 am - 1:00 pm  Exhibit Hall
- 11:00 am - 12:00 pm  NBNA Nursing Innovations Theater (CEUs TBD)
- 12:00 pm  Passport Raffle
- 12:30 pm  Grand Raffle
- 1:00 pm - 3:00 pm  Workshops (select one session; (2 CEUs)
- 1:00 pm - 4:00 pm  Breast Cancer Screening Practicum
- 3:30 pm - 4:30 pm  NBNA Choir Rehearsal
- 6:00 pm - 7:00 pm  Board and Lifetime Member Photo
- 7:00 pm - 11:00 pm  President’s Gala

**SUNDAY, AUGUST 7**
- 8:00 am - 9:30 am  Ecumenical Service
- 10:00 am - 12:00 pm  Brunch and Closing Session (1 CEU)