



You are cordially invited to

## EXHIBIT

at the

## NECOEM/MaAOHN

# Occupational Health Conference 2009

Place:

Date: **2009**

MORE THAN 250 occupational health professionals are expected to attend this event. This is your opportunity to showcase your product and/or service to these major decision makers who want to remain on the cutting edge of their field. The conference provides them the opportunity to preview the latest products and services. You can look forward to one-on-one contact with the physicians and nurses.

**Event sponsorships are a valuable promotional tool and benefit your company with:**

- Targeted face-to-face marketing
- Image building opportunity
- Increased exposure and visibility
- Increased sales and leads
- Networking opportunities
- Listing in the program book

### EXHIBITOR BOOTH RENTAL FEES

The exhibit fee is a \$650 flat rate that includes both days, this includes:

- Booth space (6' X 7'), clothed & skirted
- Complimentary refreshments
- A listing in Program Directory
- Continental breakfast Thursday & Friday in exhibit area
- One lunch on Thursday and one lunch on Friday (additional persons \$45.00 per day)
- Exhibitors are welcome to attend conference
- Post-registration list of attendees
- Vendors are encouraged to provide raffle items at their booth.

### CONFERENCE NOTES

*Set Up: Wednesday evening, December 3 after 6:00 pm or 7 am, Thursday December 4.*

*Exhibit Hours: Thursday, December 4: 7:30 am to 5 pm, Friday, December 5: 7:30 am to 3 pm*

*Break Down: Friday December 5: After 1:30 P.M.*

### Vendor Registration

There will be a vendor registration table available on **December 4<sup>th</sup> & 5<sup>th</sup>** for registration/ID badge pick-up. We recommend arrival by 7:00 AM for set up.

### Vendor Liaison

A NECOEM/MaAOHN conference member, Anne Lafontaine, will be available during the event to assist you. For further information regarding the conference visit [www.necoem.org](http://www.necoem.org).

## Storage

The Doubletree Bedford Glen Hotel provides storage. The hotel contact person is Tricia Kopecky. Her phone number is (781) 276-7506; fax (781) 275-3042, or [tricia.kopecky@hilton.com](mailto:tricia.kopecky@hilton.com).

## Lodging and Parking

Reservations may be made by calling (781) 275-5500 or by visiting <http://doubletree.hilton.com/en/dt/hotels/index.jhtml;jsessionid=FIIZEC5C4GT5WQCSGIBI12VCQKIYFCVUUC?ctyhocn=BOSBFDI>. The hotel has graciously given conference participants and vendors a \$129. per night rate. Please mention NECOEM when making reservations. The deadline for this rate is November 6, 2008. Reservations made after that date will be subject to rate availability. Onsite parking is free.

## Liability

Exhibitors shall at all times protect, indemnify, defend, and hold harmless the New England College of Occupational and Environmental Medicine and the MA. Association of Occupational Health Nurses against and from any and all loss, cost, damage, liability, or expense which arises out of or from or by reason of any act or omission of exhibitor, his employees, or agents.

# Exhibitor Registration

Please complete clearly as this information will be used for the conference book.

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Web Site Address \_\_\_\_\_

Contact \_\_\_\_\_ Title \_\_\_\_\_

Additional Representative(s) \_\_\_\_\_

**FEES:** Please make checks payable to NECOEM.

**EXHIBITOR BOOTH RENTAL:** \$650.00 (includes both days) \_\_\_\_\_

Additional luncheons: \$45.00 per lunch (Thurs. 12/4) \_\_\_\_\_ (Fri. 12/5) \_\_\_\_\_

*Payments: I hereby agree to pay 50% of the rental fee with the application. The remaining balance of 50% is due on November 1, 2008. All booth space must be paid in full on or before November 1, 2008. If assigned space is not paid for in full by the specified date, exhibitor will not be permitted to set up their booth at the conference. If space is purchased after November 1, 2008 the full amount of the booth is due with the application.*

**Please mail registration and vendor checks payable to NECOEM to:**

Anne Lafontaine

PO Box 1044 Williamsburg, MA 01096-1044

Telephone: (413) 268-3879 Email: [alafontaine@brosco.com](mailto:alafontaine@brosco.com)