

Sponsorship / Exhibitor / Advertising Application

NHRMA 2008 Conference & Tradeshow

September 16-18, 2008 | Three Rivers Convention Center | Kennewick, Washington

SPONSORSHIP - Please refer to the Sponsorship Opportunities section in this Prospectus.

YES, we would like to support NHRMA's 2008 Conference and Tradeshow at the _____ Level. \$ _____

Program Activity/Product Item: _____ Activity Date: _____

TRADESHOW EXHIBITOR

Paid by 2/1/08 \$1,295 - Premium Single Booth \$995 - Standard Single Booth \$ _____

\$2,295 - Premium Double Booth \$3,695 - Display Island

Paid by 6/1/08 \$1,595 - Premium Single Booth \$1,295 - Standard Single Booth

\$2,595 - Premium Double Booth \$3,995 - Display Island

Paid after 6/1/08 \$1,895 - Premium Single Booth \$1,595 - Standard Single Booth

\$2,895 - Premium Double Booth \$4,295 - Display Island

Organization(s) you wish to be near away from: _____

Submission of this application to exhibit implies consent to the items, conditions and regulations governing exhibits of the Conference published in the Prospectus. The Exhibitor agrees to abide by all rules, requirements, restrictions, and regulations as set forth in the Prospectus and as may be specially designated by Conference Management. Failure to abide by such rules and regulations results in forfeiture of all monies paid by or due from Exhibitor.

Yes, I will bring a Door Prize valued at \$25 or more. Prize description: _____

ONE COLOR AD (Advertisement sales close 7/8/08. Ad artwork due 7/15/08.)

Back Cover - \$1,750 Inside Front Cover - \$1,500 Inside Back Cover - \$1,350

2 Page Spread - \$1,250 Full Page - \$750 Half Page - \$500 (horizontal only) \$ _____

Two-color - additional \$200 \$ _____

EXHIBITOR SPECIAL (Advertisement sales close 7/8/08. Ad artwork due 7/15/08)

Discount with purchase of Exhibit space and an Advertisement <\$150> \$ _____

MARKETING SPECIAL - Marketing insert in the Conference Registration Packet - \$950

Discount for exhibitors and sponsors - limited number available <\$100> \$ _____

Enclosed please find my check payable to **NHRMA 2008** in the amount of **TOTAL** \$ _____

Contact Person:

Please print or type

First Name _____ Last Name _____ E-mail _____

Organization _____ Phone () _____

Organization name for listing and signage, if different (text only - no logos) _____

Address _____ Fax () _____

City _____ State/Province _____ Zip/Postal _____

Website _____ Sales Telephone () _____

Brief one or two-sentence description of services/products offered by your organization for Sponsor/Exhibitor Guide: _____

Signature _____ Date _____

Please send this completed form with payment to:

NHRMA 2008, c/o Conference Solutions, 2545 SW Spring Garden St., Suite 150, Portland, OR 97219. Phone 503.244.4294; Fax 503.244.2401