

MISSISSIPPI NURSES' ASSOCIATION PRESENTS...

# The 24<sup>th</sup> Annual Statewide Nursing Summit

## 2018



Dear Exhibitor/Sponsor:

The Mississippi Nurses Association's 2018 Nursing Summit will be from 7:30 a.m. until 3:30 p.m. Tuesday, February 6, 2018 at the Jackson Convention Complex, 105 East Pascagoula Street, Jackson, Mississippi. We expect to have over 800 registered nurses and nursing students attending the Summit to meet with legislators, hear nationally recognized speakers, and participate in this once-a-year event which brings nurses from all over Mississippi to Jackson. Exhibitor space will be limited. You will not want to miss the opportunity to network with this group.

Please complete the 2018 Nursing Summit Exhibitor Form and Contract and fax it to MNA at (601) 898-0190 or email [dwalker@msnurses.org](mailto:dwalker@msnurses.org) by Friday, January 19.

If you have any questions, please call our office at (601) 898-0670.

We hope to see you as an exhibitor in February!

**Dana Walker**

Mississippi Nurses' Association  
Director of Events & Marketing

# 2018: 24<sup>th</sup> Annual Nursing Summit Exhibitor and Sponsor Contract

The Mississippi Nurses Association's 2018 Nursing Summit Exhibit Hall table assignments will be made on a first-come, first-served basis. Exhibitors may set up on **Monday, February 5, between 2:30 p.m. and 4:30 p.m. or between 6:30 a.m. and 7:30 a.m. on Tuesday, February 6**, at the Jackson Convention Complex, 105 East Pascagoula Street in Jackson.

**The booth fee is \$450.** Payment is due by **Friday, Jan. 19, 2018**. Please complete the following form and fax it to (601) 898-0190, or e-mail it to [dwalker@msnurses.org](mailto:dwalker@msnurses.org).

**Contract and payment must be in the MNA office by close of business Friday, Jan. 19.**

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

Contact Person: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

\$ \_\_\_\_\_ **Exhibit Fee - \$450**

This fee includes one 8-foot back drop, one skirted table, two chairs and one ticket for lunch\*. (This contract does hereby request and agree to reserve an exhibit space for exclusive use during the 2018 Nursing Summit at the Jackson Convention Complex on Tuesday, February 6.)

\$ \_\_\_\_\_ **\*Additional Lunches - \$15 each**

\$ \_\_\_\_\_ **Meal Sponsor - \$1,500**

This fee includes sponsorship signage stating the agency's name in the dining area and special recognition of the agency at the keynote luncheon.

\$ \_\_\_\_\_ **Networking Break Sponsor - \$950**

This fee includes sponsorship signage stating the agency's name in the dining area.

\$ \_\_\_\_\_ **Total Amount Enclosed**



\_\_\_\_\_ Account Number      CVV Code      Exp. Date      Zip Code

\_\_\_\_\_  
Card Holder's Signature

\_\_\_\_\_  
Card Holder's Name (Please Print)

Please indicate the names and email addresses of individuals who will be present at your exhibit. (Remember, the exhibitor fee only includes lunch for one. Additional lunches may be purchased for \$15 each)

1. \_\_\_\_\_ Email Address: \_\_\_\_\_

2. \_\_\_\_\_ Email Address: \_\_\_\_\_

I will need a table skirt       I am bringing a table skirt with company logo