

Let's do the Charleston



Choreographing New Steps in WOC Nursing Care

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2013

ANNUAL TRADE SHOW
SEPTEMBER 12-14, 2013



Embassy Suites Hotel & Convention Center • North Charleston, SC

EXHIBITOR SCHEDULE OF ACTIVITIES

Thursday, September 12

- 12 - 3 p.m.** Exhibitor Setup
- 4:15 - 6:45 p.m.** Exhibits open with reception and cash bar in exhibit area with poster session and silent auction.

Friday, September 13

- 11:45 - 2:45 p.m.** Exhibits open with lunch in exhibit area, poster session and silent auction.
- 2:45 p.m.** Exhibits close; booths must be removed by 6 p.m.



Charleston Area Convention & Visitors Bureau (CACVB), www.charlestoncvb.com

- The exhibitor schedule of activities is subject to change

You are invited to exhibit September 12-13, during the Southeast Region Wound, Ostomy and Continence Nurses Society (SER WOCN) Annual Conference held September 12-14, 2013 at the Embassy Suites Hotel & Convention Center; North Charleston, SC. Over five hours of quality exhibit time are planned, including a luncheon on Friday in the exhibit area. Don't forget, Educational Sessions are included in the exhibitor fee, and exhibitors are encouraged to attend. Network, develop new customers, and expand your company name with those in your field... Register today!

QUESTIONS SHOULD BE DIRECTED TO:

Ian Cordes at SER WOCN
c/o Corecare Associates
200 Butler Street, Suite 305
West Palm Beach, FL 33407
Phone: (561) 659-5581
Fax: (561) 659-1291
icordes@serwocn.org
www.serwocn.org

EXHIBITOR OPPORTUNITIES

Exhibitor Opportunities

For prime exhibit space, please consider funding an educational symposium, conference sponsorship and/or unrestricted educational grant. This year we have a number of educational symposium and conference sponsorship options available. Payment for all exhibitor opportunities is in addition to the cost of exhibiting, unless stated otherwise.

Additional recognition will be given to exhibitors who reach our recognition levels. Recognition levels are met by supporting SER WOCN financially through a variety of options such as exhibitor fee(s), conference sponsorship opportunities, educational symposiums and unrestricted educational grants. Exhibitors will be individually recognized for their contribution in the conference program booklet and signage throughout the conference. The level of recognition will be dependent upon the total amount of contribution.

- **Diamond \$10,000 or greater**
- **Gold \$6,000-\$9,999**
- **Silver \$3,000-\$5,999**

EXHIBITOR FEE

Exhibitor Fee is \$1,000. This includes a 8' x 10' exhibitor booth, a list of attendees and a complimentary lunch in the exhibit hall on Friday.

EDUCATIONAL SYMPOSIUMS

Educational Symposiums offer exhibitors an exclusive way to share their message by sponsoring a meal and educational lecture with a speaker and topic of their choice. Exhibitors will be responsible for all costs associated with their symposium.

- Breakfast Symposium on Friday, Sept. 13th
- Breakfast Symposium on Saturday, Sept. 14th
- Lunch Symposium on Saturday, Sept. 14th

Requests for a specific educational symposium time slot are on a first come basis. For more information about educational symposiums contact Corecare Associates.

UNRESTRICTED EDUCATIONAL GRANTS

Exhibitors may offer to support SER WOCN through an unrestricted educational grant to reduce conference costs. For more information about unrestricted educational grants contact Corecare Associates.

CONFERENCE SPONSORSHIPS

Sponsorships are an excellent opportunity for exhibitors to market themselves. Sponsorships include:

\$1,000

- Pre-Conference Breakfast on Thursday, September 12th

\$500

- Morning Break on Friday, September 13th
- Afternoon Break on Friday, September 13th
- Morning Break on Saturday, September 14th

Requests for sponsorship time slots are on a first come basis. For more information about conference sponsorships contact Corecare Associates.

EXHIBIT RESERVATIONS

SER WOCN will process exhibit reservations only upon receipt of the completed exhibit contract and payment in full for the exhibit booth(s). Exhibit booth assignments will be made by SER WOCN on a first-come, first-served basis. SER WOCN reserves the right to reject, restrict or reassign any exhibit as may be required in the best interest of other exhibitors or the Association, prior to and during the trade show.

EXHIBITOR GUIDELINES

- 1) Exhibitors may not share exhibit space.
- 2) An exhibitor company that decides to cancel may not sell or assign its exhibit space to another company.
- 3) Two representatives are included per exhibit space.
- 4) Additional representatives will be charged \$150 per person with a maximum of four representatives per space.
- 5) Spillover into the aisle space will not be acceptable.
- 6) Food or drink served at your display must be provided by the hotel. Please contact the conference services manager for more information.
- 7) Exhibitors must comply with all federal, state, and local fire and building codes that apply to places of public assembly.
- 8) Exhibitors are prohibited from the following: loud or amplified speech or music, distracting bright lights, or utilization of space outside an exhibit or in the aisles. In addition, the use of propane or bottled gas within the building is prohibited. Helium balloons are allowed inside the exhibit areas. There will be a charge for any balloons that need to be retrieved by the hotel or decorator.

EXHIBITOR INFORMATION

BOOTH AND PERSONNEL INFORMATION

Each 8' x 10' booth is priced at one thousand dollars (\$1,000). It will be piped and draped, and located in a carpeted area. For each booth purchased, the following will be included:

- One 44" x 7" sign identifying the company
- One draped and skirted 6' table
- Two chairs and one wastebasket

Electricity, additional furnishings, labor, freight, and/or drayage services may be rented at exhibitor expense from the conference decorator. Information on these services will be sent with confirmation letters after receiving your registration.

There is a maximum of 4 representatives per booth.

HOTEL ACCOMODATIONS

The site of this conference is the Embassy Suites Hotel & Convention Center; North Charleston, SC. The Embassy Suites Hotel has a block of rooms being held for attendees and exhibitors from September 11-14, 2013 at the rate of \$139 per night, single or double. Please inform the reservations clerk that you are part of the Southeast Region WOCN conference.

Reservations may be made by calling the Embassy Suites at 1-843-747-1882 or online at www.serwocn.org/2013Conference



EMBASSY SUITES
Charleston Area Convention Center



SECURITY AND LIABILITY

Exhibitors are responsible for their own booths and possessions during the hours that the exhibits are open. The exhibit hall will be locked during closed hours. Upon signing the Contract to Exhibit, it is understood that the exhibitor agrees to make no claims against the agents, employees, members, or representative of the Southeast Region Wound, Ostomy and Continence Nurses Society or the Embassy Suites Hotel & Convention Center for loss, theft, damage, or destruction of goods, nor for injury to either himself/herself or employees while on Embassy Suites Hotel & Convention Center property. Should any emergency arise prior to the opening of the conference and exhibits that would prevent the conference from being held, it is expressly understood that the SER WOCN will not be held liable for any expense or losses incurred by exhibitors.

EXHIBITOR SPONSORED ACTIVITIES

Exhibitors may not schedule any activities that conflict with exhibit times or educational offerings.



SER WOCN EXHIBITOR REGISTRATION FORM

Name of Exhibitor Contact Person for Conference _____
(This person will receive all correspondence prior to, and following the conference)

Company Name _____
(For your booth identification sign)

Complete Address of Contact Person _____

City/ST/ZIP _____

Office Phone _____ Fax _____

E-Mail _____

List any companies to avoid assigning next to your booth: _____

Indicate Names for Name Badges: Two (2) name badges are included per booth. There is a four (4) person maximum.

1. _____ 2. _____

3. _____ 4. _____

Please check desired sponsorship and/or exhibit opportunities:

a. Exhibitor _____ booths x \$1,000 each = \$ _____

b. Additional Personnel _____ x \$150 each = \$ _____

Sponsorships:

Pre-Conference Breakfast \$1,000 = \$ _____

Morning Break on Friday \$500 = \$ _____

Afternoon Break on Friday \$500 = \$ _____

Morning Break on Saturday \$500 = \$ _____

Total Paid \$ _____

For additional information, call (561) 659-5581, or e-mail icordes@serwocn.org.

Credit Card Payment

I authorize SER WOCN to charge my credit card for the amount of \$ _____

MC VISA American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security code from the front or back of card _____

Billing Address: _____

Signature _____ Date _____

Please make check payable to
"Southeast Region WOCN"
and mail to:
SER WOCN c/o Corecare Assoc.
200 Butler Street, Suite 305
West Palm Beach, FL 33407

(561) 659-5581
info@serwocn.org
www.serwocn.org

WOCN is a not-for-profit corporation. Its tax ID number is 25-1251887.

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Contract to Exhibit Southeast Region Wound, Ostomy and Continence Nurses Society



Date _____

The SER WOCN hereby leases to _____
(company name)

Address _____

City, ST, ZIP _____

One or more 8' x 10' booth(s) for the purpose of exhibiting, demonstrating, and otherwise advertising their products at the Southeast Region Wound, Ostomy and Continence Nurses Society conference, September 12-13, 2013. In consideration of this lease, the lessee hereby agrees to pay to the order of SER WOCN, the sum of \$1,000 per booth. For each booth leased, the exhibitor will be provided complimentary registration to the conference. A fee of \$150 will be charged for each additional representative after the first (2). Cancellations must be requested in writing by August 15, 2013 and are subject to a \$100 processing fee. No cancellation or refunds will be granted after August 15, 2013. The Southeast Region WOCN Tax ID Number is 25-1251887. By signing and entering into this contractual agreement with Southeast Region WOCN, the exhibitor agrees to both its terms and the terms contained in the above.

Authorized Representative of Exhibitor:

Signature and Title



Charleston Area Convention & Visitors Bureau (CACVB), www.charlestoncvb.com

***Please include a completed agreement with your payment, or fax it to SER WOCN at (561) 659-1291.
For additional information, please call (561) 659-5581.***

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