

RNAO presents:

# Knowledge, the Power of Nursing:

**Celebrating Best Practice Guidelines and Clinical Leadership**

October 18 - 20, 2010, Intercontinental Hotel, Toronto

## Conference Sponsorship & Exhibitor Prospectus



	Logo Recognition	Verbal Recognition	Speaking Opportunity	Exhibitor Booth	Material Insert	Program Advertising
<b>Platinum Sponsor - \$6,000</b> Play a key role in the RNAO AGM! Reinforce your presence throughout the AGM by having your organization recognized at the Opening Ceremonies, receive two complimentary tickets to the President's Banquet and take advantage of a complimentary exhibitors booth.	✓	✓	✓	✓	✓	✓
<b>Gold Sponsor - \$4,500</b> Leave a lasting impression with delegates by playing a key role at the conference!.	✓	✓	✓	50% off	✓	
<b>Silver Sponsor - \$3,000</b> Get noticed with a speaking opportunity and logo recognition.	✓	✓	✓	25% off		
<b>Delegate Tote Bag Sponsor - \$2 000</b> This level is exclusive to one organization. A minimum of 500 tote bags will be ordered.	✓				✓	
<b>Networking Reception Sponsor - \$2 000</b> This networking session is open to all delegates and is a prime opportunity to reach participants after sessions.	✓					✓
<b>Insertion into Delegate Package - \$300</b> Showcase your organization, product or service by including a promotional item into the conference delegate kit.					✓	
<b>Advertisement in On-Site Program - \$500</b> Receive a complimentary exhibit booth and logo recognition in exchange for advertising our conferences.	✓				✓	
<b>Prime Exhibitor - \$1,400</b> These booths will be located in a prime located in the foyer of the main conference room. Space is limited and is available on a first come, first served basis.	✓				✓	
<b>Corporate Exhibitor - \$1,000</b> Exhibits will be located in the exhibit hall and will be open all day.				✓		
<b>Not-For-Profit Exhibitor - \$600</b> Exhibits will be located in the exhibit hall and will be open all day. Proof of not-for-profit status required.				✓		

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**SPONSORSHIP AND EXHIBITOR REGISTRATION FORM**

**Additional Exhibitor Information**

- **Exhibitor package includes:**
  - Exhibiting on Monday, October 18, 2010:  
Break - 10:00 - 10:30am  
Lunch - 12:00 - 1:00pm  
Break - 2:30 - 3:00pm  
Reception - 4:00 - 5:30pm
  - Exhibiting on Tuesday, October 19, 2010:  
Break - 10:00 - 10:30am  
Lunch - 12:00 - 1:00pm  
Break - 2:30 - 3:00pm\*  
\* Times may change. They will be confirmed closer to the date.
  - One 6' x 8' draped booth space
  - One 6' draped table with two chairs
  - Coffee, refreshments and lunch for exhibitors (maximum two exhibitors per booth), additional tickets may be purchased before the event at a cost of \$25.00 per ticket (including GST)
- An exhibitor kit containing information and rates for electrical and internet connections will be provided by the marketing coordinator four (4) weeks prior to the conference.
- Spacing is reserved on a first-come, first-served basis and with consideration for availability of requested area, amount of space requested, special needs and compatibility of exhibitors. Space is limited.
- Cancellations must be received in writing 30 days prior to the event, and will incur a 30% cancellation fee. No refunds will be made for cancellations received after the 30 day deadline.

**Deadlines**

- To ensure your company logo is included in the on-site printed program, please email logo (high resolution quality, 300 dpi) by: **Friday, October 1, 2010**
- To ensure your insert is included in our delegate bags, please send material by:  
**Friday, October 1, 2010**

Please send all materials attention to Victoria van Veen to:

**[events@rnao.org](mailto:events@rnao.org)**

RNAO Marketing - Registered Nurses' Association of Ontario,  
158 Pearl Street, Toronto, Ontario M6H 1L3

Please visit [www.RNAO.org/Exhibitorpolicies](http://www.RNAO.org/Exhibitorpolicies) to access the RNAO Sponsorship and Exhibitor policies

**Would you like information on other Sponsorship & Exhibiting Opportunities?**

[Contact events@rnao.org](mailto:events@rnao.org)  
[www.rnao.org/exhibitors](http://www.rnao.org/exhibitors)

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Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**Sponsorship Option:**

My organization would like to participate as (please check):

- |   |         |
|---|---------|
| <input type="checkbox"/> Platinum Sponsor                 | \$6,000 |
| <input type="checkbox"/> Gold Sponsor                     | \$4,500 |
| <input type="checkbox"/> Silver Sponsor                   | \$3,000 |
| <input type="checkbox"/> Delegate Bag Sponsor             | \$2,000 |
| <input type="checkbox"/> Networking Reception Sponsor     | \$2,000 |
| <input type="checkbox"/> Insertion into Delegate Package  | \$ 300  |
| <input type="checkbox"/> Advertisement in On-Site Program | \$ 500  |
| <input type="checkbox"/> Prime Exhibitor                  | \$1,400 |
| <input type="checkbox"/> Corporate Exhibitor              | \$1,000 |
| <input type="checkbox"/> Not-For-Profit Exhibitor         | \$ 600  |

Note: Exhibit Hall booth selection is on a first-come first-served basis. Contact RNAO to reserve your spot as soon as possible, as spaces are filled quickly.

**Submit this registration form with payment:**

**By Mail:**  
 Victoria van Veen  
 RNAO Centre for Professional Nursing Excellence  
 158 Pearl Street, Toronto, ON M5H 1L3

**By Email:**  
[events@RNAO.org](mailto:events@RNAO.org)

**By Fax:**  
 Local (416) 599-1926  
 Toll Free 1-888-881-9782

Total Participation: \$ \_\_\_\_\_  
 + 5% GST \$ \_\_\_\_\_  
 GST # 107883282  
 Total: \$ \_\_\_\_\_

I have read and understood the RNAO Sponsorship and Exhibitor policies at: [www.RNAO.org/Exhibitorpolicies](http://www.RNAO.org/Exhibitorpolicies)

**Method of Payment**

Payment must accompany the registration form in order to be processed.

Cheque (Payable to RNAO)  VISA  MasterCard

Amount: \$ \_\_\_\_\_ Card Holder Name: \_\_\_\_\_  
 Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_