

# WINTER SEMINAR

“How Telemedicine Can Improve Texas Rural Health”



## Exhibitor Prospectus

Date: December 6, 2017

Time: 9:30am – 2:00pm

Location: All lectures will be held in the Board Room (733) at Texas Hospital Association, 1108 Lavaca, Ste. 700, Austin, TX 78701

### Who Attends The TRHA Annual Conference?

This seminar draws over 50 people who are involved in rural health. These attendees include healthcare providers and administrators. They are all attending with a focus to network and learn more about Telemedicine.

### Why Exhibit With TRHA?

Exhibiting at this conference allows you direct access and interaction with a unique and targeted rural health audience. Use this opportunity to make new connections or maintain existing relationships, and to gain brand awareness

### Benefits of Exhibiting at TRHA

You are assured of maximum traffic at multiple times throughout the seminar. Your participation and support is promoted before, during and after the seminar is over.

### Pricing

Table Top Exhibit Price-\$350

*All exhibit booths are table top. Exhibitors receive complimentary conference meals and refreshments.*

### Benefits included in the exhibit booth price include:

- Name and website link on TRHA website (seminar page)
- Listing in meeting onsite syllabus
- Pre and Post attendee mailing list (does not include emails)
- Exhibitor ribbon on badges
- 2 exhibitor badges (each additional badge is \$50)

#### Exhibitor Schedule

Wednesday, December 6, 2017

Move In – 8:00am – 9:00am

*\*See the conference agenda for the full break schedule*

#### Additional Advertising

\$250 – Folder Sponsor

\$250 – Pen Sponsor

\$250 – Lanyard Sponsor

### Door Prizes!!

All exhibitors are encouraged to donate a door prize. Prize drawings will be held regularly during breaks and all prizes will be picked up from your booth.

# 2017 Winter Seminar

December 6, 2017 | Austin, Texas

Please mail, email or fax the completed form with your payment to:

Mail: TRHA | PO Box 201363 | Austin, TX 78720 | Fax: (866) 235-2557

Questions? 512-368-9860 | kdurapau@trha.org



Company/Organization Name

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Contact Person

Phone

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Address

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City/State/Zip

Email Address

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Exhibit Table (\$350)

### Additional Sponsorship Options

\$250 Folder

\$250 Lanyard

\$250 Meeting Pens

Yes, I would like to donate a door prize

**TOTAL DUE \$** \_\_\_\_\_

### Payment Options

Check# \_\_\_\_\_  Credit Card

Name as it appears on card

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### PERSON AUTHORIZED TO CHARGE: Company and/or individual

First Name

Last Name

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Card Type

VISA

Mastercard

AMEX

Discover

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Card Number

Expiration Date

Security Code

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Signature Authorizing Charge

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Email Address

Phone

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### BILLING ADDRESS: Please enter the following information exactly as it appears on your credit card statement

Address

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City

State/ Zip

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I agree to all of the requirements and conditions listed in the Exhibitor/Sponsor Agreement.

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of TRHA Staff

\_\_\_\_\_  
Date