

Massachusetts Organization of Nurse Executives

Reservation for Exhibitor Space 2009 - 2010

Please complete this form and return via e-mail, fax or mail.

Email: info@massone.org Phone: 781-272-3500 Fax: 781-272-3505

Address: 101 Cambridge St., Suite 110, Burlington, MA 01803

Name of Organization: _____

Street Address: _____ Phone: _____

City/State/Zip _____ Fax: _____

Name Contact person: _____ E-mail: _____

Name(s) of Reps attending event: _____

(Name) (Title)

(Name) (Title)

EXHIBITOR OPPORTUNITIES

Please reserve the following Exhibitor space.

(Initial beside desired space.)

QUARTERLY MEETINGS:

Fall Educational Meeting
September 10, 2010
Four Points Sheraton
Norwood, MA

Winter Educational Meeting
December 10, 2010
Burlington Marriott
Burlington, MA

Spring Educational Meeting
March 12, 2010
Devens Common Center
Devens, MA

Exhibitor Placements: \$1,000 each event

Includes breakfast and lunch for up to two representatives,
6-foot display table, acknowledgement in program materials,
and one annual MONE Membership Directory per year.
(Additional attendees - \$250 each)

_____ Total due

Nursing Leadership Seminar, April 20 - 21, 2010 Conference Center at Waltham Woods, Waltham, MA

_____ 1 Day \$1,200

_____ 2 Days \$1,500

_____ Total Due

Includes breakfast and lunch for up to two representatives,
6-foot display table, acknowledgement in program materials,
and one annual MONE Membership Directory per year.
(Additional attendees - \$250 each per day.)

Annual Educational Meeting, June 7 - 8, 2010, Chatham Bars Inn, Chatham, Cape Cod, MA

_____ 1 Day \$2,000

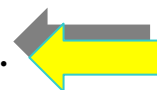
_____ 2 Days \$2,500

_____ Total due

Includes breakfast and lunch for up to two representatives,
6-foot display table, acknowledgement in program materials,
and one annual MONE Membership Directory per year.
(Additional attendees - \$250 per person.)
Exhibitors may attend the Awards Dinner on Monday evening
for an additional charge of \$100.00 per person



Please note exhibitor-package opportunities on the next page.



Payment Method: Check: Please mail check to: MONE, 101 Cambridge Street, Suite 110, Burlington, MA 01803

Credit Card: MasterCard Visa Account # _____ Total: _____

Name on Card: _____ Expiration Date: _____ / _____ Billing Address Zip Code _____

Massachusetts Organization of Nurse Executives

Discounted Exhibitor Package Opportunities 2009 - 2010

Package #1: Reserve space at all 5 meetings Cost \$6,000 Save \$1,000
 (Value: \$7,000)

Reserve space at 4 meetings

Package #2: 3 Quarterly Meetings and Leadership Seminar (2 days) Cost \$4,000 Save \$500
 (Value: \$4,500)

Package #3: 3 Quarterly Meetings and Annual Meeting (2 days) Cost \$4,800 Save \$700
 (Value: \$5,500)

Reserve space at 3 meetings

Package #4: 2 Quarterly Meetings and Leadership Seminar (2 days) Cost \$3,000 Save \$500
 (Value: \$3,500)

Package #5: 2 Quarterly Meetings and Annual Meeting (2 days) Cost \$4,000 Save \$500
 (Value: \$4,500)

Package #6: 1 Quarterly, Leadership Seminar and Annual Meeting (2 days) Cost \$4,500 Save \$500
 (Value: \$5,000)

In addition, choose any of the above exhibitor packages and save on an advertisement in the 2010-2011 MONE Membership Directory published in December 2010.

(Deadline for camera-ready ads – October 1, 2010)

Meeting package options:

(Scheduled and paid in advance.)

Membership Directory Ad (Standard placement)

	Full-page - Value	Half-page - Value	Quarter-page - Value
Package #1: plus Directory ad	\$1,000 (\$1,500)	\$600 (\$1,000)	\$300 (\$500)
Package #2 or 3 plus Directory ad	\$1,100	\$650	\$325
Package #4, 5 or 6: plus Directory ad	\$1,200	\$700	\$350

Exhibitor Space Package # _____	Total _____
Additional Membership Directory Advertisement _____	Total _____
Size of Advertisement _____	Total _____
Grand Total Enclosed _____	

Please indicate choice of meetings on the previous page.

Cancellation policy: No refund will be given for exhibitor packages; however a request may be made for space at an alternate meeting, as space permits.