

VHHA Annual Meeting

November 5-7, 2014

Exhibit Guidelines

Shipments should be labeled as follows:

The Homestead Resort

7696 Sam Snead Highway

Hot Springs, Virginia 24445

Hold for VHHA Annual Meeting –November 5-7

Attention: Tonya Purvis-Kincaid, Conference Services

- Exhibits may be set up on Wednesday, November 5, after 2 p.m. in the Grand Ballroom Foyer. All exhibitors must contact VHHA staff at the VHHA Registration desk **prior to** setting up your exhibit.
- The first function at which your exhibit receives exposure to meeting attendees begins at 7:30 a.m. on Thursday, November 6, with the Morning Coffee in the Grand Ballroom Foyer. The general session will take place in the Grand Ballroom from 8:30 a.m. until 11:30 a.m.. At the beginning of the general session, all sponsors will be recognized. There will be a mid-morning break. There is no afternoon session.
- On Friday, November 7, the Morning Coffee begins at 8 a.m. in the same location as the day before. The general session begins at 9 a.m. and will adjourn by 11:30 a.m.
- All exhibits are to be taken down no later than noon on Friday, November 7.
- Whether you take your exhibit down on Thursday or Friday, please make sure that you do not interfere in any way with conference sessions or activities.
- A 6' skirted table will be provided for tabletop exhibits. If you are using a stand-alone exhibit, it cannot exceed 8' x 8' x 8'.
- It is understood that exhibitors are financially responsible for any special equipment and/or services requested or arranged by them. Each exhibitor is solely responsible for setting up and removing its display. Exhibitors are reminded that tips for exceptional service are always appreciated by the staff at The Homestead.
- No activity of exhibitor representatives or functions of a display should in any manner interfere or disturb neighboring exhibitors. Electrical or other apparatus must be operated so that the noise will not interfere with other exhibitors.
- Neither VHHA nor The Homestead Resort shall be liable for any damage to or for the loss or destruction of any exhibit or from the theft or disappearance of any property contained in or about the exhibit.



VIRGINIA HOSPITAL
& HEALTHCARE
ASSOCIATION

An alliance of hospitals and health delivery systems

**Annual Meeting
November 5 – 7, 2014
The Homestead, Hot Springs**

Exhibit Needs

I will exhibit Yes No (skip to bottom of page)

My exhibit is Tabletop Freestanding (cannot exceed 8x8x8)

of Chairs Needed _____

I will need an outlet Yes No (additional fees apply)

I will need Internet Yes No (additional fees apply)

I plan to set up my exhibit on _____(day) at _____(time).

I plan to tear down my exhibit on _____(day) at _____(time).

Any additional requests:

I understand that I am responsible for any expenses associated with my exhibit.

Name of Contact: _____

Name of Firm: _____

Please complete this form and return to Sheila Gray at sgray@vhha.com no later than October 28.

Thanks!



THANK YOU FOR BEING WITH US!

ON DEPARTURE DAY IF YOU ARE SHIPPING YOUR TRADE SHOW MATERIALS OUT, PLEASE COMPLETE THE SHIPPING FORM (REVERSE) AND LEAVE YOUR READY TO SHIP MATERIAL AT YOUR EXHIBIT SPACE.

IF YOU ARE DEPARTING WITH YOUR TRADE SHOW MATERIAL DURING NORMAL BUSINESS HOURS, PLEASE DIAL EXTENTION 57515 FROM A HOUSE PHONE OR 540-839-7515 FOR ASSISTANCE WITH TRANSFERRING TRADE SHOW MATERIAL TO THE LOADING DOCK. AFTER HOURS, PLEASE DIAL 0 FROM A HOUSE PHONE OR 540-839-1766 AND AN OPERATOR WILL PAGE CONVENTION SET-UP.

IF YOU HAVE VALET PARKE YOUR CAR, PLEASE CALL 57711 FROM A HOUSE PHONE OR 540-839-7711 TO HAVE IT BROUGHT TO THE FRONT DRIVE. DIRECTIONS TO THE LOADING DOCK WILL BE PROVIDED AT THAT TIME. IF YOU PLAN TO ATTEND ADDITIONAL GROUP SESSIONS OR ENJOY THE PROPERTY, PLEASE BRING THE VEHICLE BACK TO THE FRONT DRIVE. WE WILL BE HAPPY TO VALET IT AGAIN.

ALL LOADING AND UNLOADING WILL BE ROUTED THROUGH THE HOMESTEAD LOADING DOCK, NOT THROUGH THE FRONT OF THE HOTEL.

THANK YOU,
MANAGEMENT

SHIPPING FORM

*Denotes Fields Required

Air Bill Available at Business Center

*Employee's Signature _____

*Guest's Signature _____

*Date _____ *Room/Dept _____

CHARGE TO: Room#, Credit Car, Federal Express or UPS Account #

*Enter Charge # _____

SHIPPED TO

*NAME: _____

COMPANY _____

*STREET (NO PO BOXES) _____

*APT./ FLOOR _____ *PHONE # _____

*CITY/STATE/ZIP: _____

VALUE/INSURED AMOUNT \$ _____ NUMBER OF PACKAGES _____

*DESCRIPTION OF CONTENTS: _____

**INTERNATIONAL PACKAGES MUST HAVE INTERNATIONAL AIR WAY BILL AND
COMMERCIAL INVOICE FORMS (4 COPIES)**

Friday Shipment: YES _____ NO _____ for Saturday Delivery if available

Drop off Time 11:00 A.M.

Federal Express

Priority _____ Standard _____ 2 Day Economy _____

3 Day SAVER _____

Drop off Time 3:00 P. M.

UPS

Next Day _____ 2nd Day Air _____ Ground _____