



Dear Valued Sponsor:

On behalf of the Virginia Point-of-Care Coordinators, we are pleased to extend to you an invitation to participate in a Vendor Fair and Vendor Showcase Session to be held on Friday, April 3, 2020 at the Bon Secours Heart and Lung Institute at 7001 Forest Ave, Richmond, VA 23230.



Each vendor will receive full meeting registration for two representatives, admission to the educational session, lunch, and an opportunity to network with Virginia Point of Care Coordinators and showcase your latest products. The cost per table per vendor will be \$100.00. Since space restrictions limit us to 6-8 vendor tables, applications to exhibit will be accepted as they are received until all spaces have been assigned. To reserve your exhibit table, please submit a completed application form (enclosed) along with the exhibit fee prior to March 20, 2020. Contact Katherine Bodnar at Katherine_Bodnar@bshsi.org with any questions.

At the completion of the Vendor Fair, the afternoon session will include a Vendor Showcase which will allow the first six responses to participate. You will be given 5 minutes to speak about the latest release of your products.

Thank you for your support of the Virginia Point-of-Care Coordinators Educational Forum and Vendor Fair. Without your support, our programs and activities would not be possible. We look forward to seeing you at the meeting!

Sincerely,

Katherine Bodnar-Brown
Virginia Point of Care Coordinators, President

APPLICATION FOR EXHIBIT SPACE

Application for exhibit space at the April 3rd Virginia POCC meeting indicates the applicant's willingness to abide by all accompanying exhibit terms and conditions, general regulations as well as such additional rules and regulations as the conference management deems necessary for the success of the exhibit.

Company Name _____

Contact Person _____

Mailing Address _____

Phone _____ Fax _____

e-mail _____

Product Description _____

Authorized Signature _____

Please print name _____

This application along with the exhibit fee of \$100.00 should be signed and received before March 20, 2020 to:

Name	Katherine Bodnar
Address	1201 Plantation Lakes Circle Chesapeake, VA 23320
e-mail	Katherine_Bodnar@bshsi.org

Confirmation of your reservation will be sent by e-mail. Please indicate special exhibit needs including specific electrical requirements, outlets, etc.

Provide names of vendor representatives per table. Please print.

1. _____

2. _____