



2015 ANNUAL CONFERENCE
EXHIBITOR SHOW REGISTRATION & SPONSORSHIP
May 1-3, 2015 Ruidoso, New Mexico

Date: November 7, 2014
To: EMS Exhibitor Representative and Other Interested Parties
Re: EMS Region III 2015 Exhibitor Registration & Sponsorship Application

Dear Exhibitor:

EMS Region III is accepting registrations for the Exhibitor Show at the 2015 EMS Region III Conference. The official start is months out, but plans for our annual conference are underway. We are expecting more than 1,000 total participants for the 2015 Conference, with a week of activities beginning **April 27th and ending on May 3, 2015** at the Ruidoso Convention Center in Ruidoso, NM. EMS Region III carries a tradition in bringing the national stage to New Mexico with the best EMS educators exhibitors from across the country, including the Land of Enchantment.

The conference **EXHIBITOR SHOW** will be held at the Ruidoso Convention Center, 111 Sierra Blanca Drive and will run from **Friday, May 1** through **Sunday, May 3, 2015**. Set-up for vehicles will be on **Wednesday, April 29th**, and setup for booths will be on **Thursday, April 30th**.

The **EMS REGION III GOLF TOURNAMENT**, in memory of longtime friend, Tim Fleming, former State EMS Medical Director, will be held **Thursday, April 30th**. A Registration form is attached. For additional information contact us at **575-769-2639** or visit our website at **www.emsregion3.org**.

Participants

Interact with over 1,000 total participants and decision makers from more than 400 different organizations from New Mexico, Texas, Colorado and Arizona by reserving your booth space in the exhibition hall.

Sponsorship Opportunity

Show your support by having a banner with your company name or logo stand out by being a event sponsor to the EMS Region III Annual Conference. The majority of our conference participants are **VOLUNTEERS** and in addition to providing a spotlight for your company or product, your support allows EMS Region III to provide affordable hands-on training and education that is needed to provide quality emergency care in the field. If you would like to support the EMS Region III Conference, please select the sponsorship(s) of your choice on the Registration page. Any sponsorship will be greatly appreciated.

WE HOPE YOU WILL BE ABLE TO TAKE TIME OUT OF YOUR BUSY SCHEDULES TO JOIN US FOR THIS EXCITING CONFERENCE. DUE TO LIMITED SPACE IN THE EXHIBIT HALL WE ENCOURAGE YOU TO MAIL OR FAX YOUR REGISTRATION FORM AS SOON AS POSSIBLE TO GUARANTEE A SPACE.

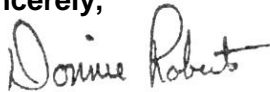
Please fill out and sign the attached exhibitor application/agreement and sponsorship form and return them to me at:

**EMS Region III
PO Box 1895
Clovis, New Mexico 88102-1895
Phone: (575) 769-2639
Fax: (575) 769-3485**

Upon receiving your registration and sponsorship form, We will mail you a confirmation letter with further details regarding booth and vehicle setup dates and times.

If you have any questions or need further information on the conference, exhibitor show, or golf tournament, contact me at (575) 769-2639 or e-mail me at droberts@emsregion3.org. We look forward to seeing you there!

Sincerely,



**Donnie Roberts, NREMT-P
Executive Director
Exhibitor Show Coordinator
Phone: (575) 769-2639
Fax: (575) 769-3485
droberts@emsregion3.org**

www.emsregion3.org

**EMS REGION III 2015 Annual CONFERENCE
EXHIBITOR APPLICATION/AGREEMENT FORM
MAY 1 – MAY 3, 2015, Ruidoso, New Mexico**

EXHIBITOR'S AGREEMENT

IT IS MUTUALLY AGREED AND UNDERSTOOD BY BOTH PARTIES:

1. That the Exhibitor shall pay rent in the amount indicated at the time of submission, along with completion of the information on page two of this contract. Payment constitutes final sale and is nonrefundable for cancellation.
2. That the Exhibitor shall pay all fees or present a purchase order no later than **March 31, 2015**.
3. That the exhibit area be used solely for the purpose of display and/or sales of the product line or service listed in the company information. Subleasing or booth space sharing is not allowed without prior approval of EMS Region III.
4. That no portion of the display shall extend into or otherwise encroach upon any other booth space, isle, walkway or public area, or rise above the show floor more than 15 feet, and that no alterations be made to the exhibit area without the consent of EMS Region III.
5. That the exhibit area shall be kept in a clean condition.
6. That the Exhibitor shall hold harmless EMS Region III or any of their agents for any liability, or personal injury to themselves or their agents, and/or loss or damage to personal property or company property during any portion of the conference.
7. That EMS Region III will open up the facility to begin receiving vehicles starting at noon on Wednesday, **April 29, 2015**.
8. That the Exhibitor displaying a vehicle shall have the vehicle at the exhibit hall no later than 1:00 pm on Wednesday, **April 29, 2015**.
9. That the Exhibitor will be allowed to set up their booth space between 8:00 am and 5:00 pm on Thursday, **April 30, 2015**. Booth location will be provided by, and at the discretion of EMS Region III.
10. That the Exhibitor has their booth broke down by 12:00 (NOON) Sunday, **May 3, 2015**.
11. It is understood and agreed that payment for **EACH BOOTH SPACE** entitles the exhibitor to:
 - a. Wireless Internet
 - b. 10' X 10' Booth with pipes, drapes, table with skirts, chairs, electrical service, and carpeting
 - c. 1 social event ticket on Thursday night for each exhibitor (max 2)
 - d. 1 Friday night cookout dinner ticket for each exhibitor (max 2)
12. It is understood and agreed that payment for **EACH VEHICLE SPACE** entitles the exhibitor to:
 - a. Wireless Internet
 - b. 10' X 25' Space
 - c. 1 social event ticket on Thursday night each exhibitor (max 2)
 - d. 1 Friday night cookout dinner ticket for each exhibitor (max 2)

EMS Region III Annual Conference 2015 Exhibitor Registration Form
Exhibitor Show, May 1-3, 2015 – Ruidoso Convention Center



Exhibitor Information

Name				
Company				
Address				
City	State		Zip	
Phone/Cell	Fax			
Email				

Booth Representatives

Name		Title	
Name		Title	
Name		Title	
Name		Title	

Registration Fees

- 10 X 10 Booth @ \$500
- Extra 10 X 10 Booth @ \$250
- 10 X 25 Vehicle Space (Ambulance) @ \$850
- 10 X 40 Large Vehicle Space @ \$1,250
- Extra Booth Staff @ \$25

If vehicle, what type?

TOTAL \$

Sponsorships

- Conference Shirts @ \$1,000
- Conference Bags @ \$1,000
- Bottled Water w/ Company Logo @ \$1,200
- Badge Lanyards @ \$1,500
- Breakout Session Refreshment Breaks @ \$500
- Friday Night Bar-B-Q and DJ @ \$500
- Golf – Longest Drive Contest @ \$400
- Golf – Closest-to-the-Pin Contest @ \$400
- Golf – Tee-Box Sponsors @ \$250

Methods of Payment (If paying by credit card, you may fax your completed form to EMS Region III at 575-769-3485)

- Checks (Payable to EMS Region III)
- Purchase Order (PO must be submitted with
- Credit Card *Visa* *MasterCard* *Discover*

Cardholder Name	
Credit Card Number	
Expiration (MM/YY)	

For Office Use Only

Date Received	Type of Payment	Amount of Payment	Confirmation



2015 EMS Region III Annual Golf Tournament

Links at Sierra Blanca- Thursday, April 30, 2015

In memory of Tim Fleming, MD, Former EMS Medical Director

Event Information

Two-Person Scramble: – 2 person teams on a **first come, first pay basis**

Registration Fee: \$120 per team – 18 holes, including green fee, cart, range balls, gift certificates, t-shirt, cap, two mulligans per player, and catered lunch. Poker golf will also be available.

Schedule: Tee time is **1:00PM – Thursday, 04/30/15** at Links Golf Course

Entry Deadline: Monday, April 13, 2015

Team Registration Information

1st Player's Full Name:	First:	Last:
Contact Details:	Email:	Phone:
2nd Player's Full Name:	First:	Last:
Partner's Contact Details:	Email:	Phone:

Payment Information

Pay by Credit Card

Card Type:	Visa	Discover	MasterCard
Cardholder Name:	First:	Last:	
Card Number:	#:		
Expiration Date:	Month/Year:	CVS (card security code on back):	
Signature:			

Pay by Check

Check Number:	#: <i>(Please make checks payable to EMS Region III)</i>
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Please send completed form, along with payment to:

EMS Region III PO Box 1895 Clovis NM 88102-1895 Phone: (575) 769-2639 Fax: (575) 769-3485	For Official Use Only: Date Received:
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