

Sponsorship Application Form

We wish to exhibit at the Manitoba Gerontological Nursing Association Conference

Emerging Issues: Health Care Today for the Older Adult

October 5, 2018 at Canad Inns - Polo Park, 1405 St. Matthews Avenue, Winnipeg.

Company: _____

Address: _____

Postal Code: _____ Phone: _____ Fax: _____

Email: _____ Website: _____

Contact Name: _____ Title: _____

Signature: _____

(By signing this contract, we agree to all Terms and Conditions listed in the Conference 2017 Package.)

List my Company in any publications, as above or: _____

Person(s) representing the company during the Conference will be:

Name: _____ Title: _____

Name: _____ Title: _____

Dietary allergies: _____

Exhibitor (\$200)

Payment: When paying by cheque, make cheque payable to "Manitoba Gerontological Nursing Association"

Set-up time ☐ October 5, 2018 @ 7:00 am

☐ I do not require a table at my booth space(s).

Booth location will be on a first-come, first-serve basis. Once we have received your application, we will call to confirm your booth location, set-up date and time, and representative names.

Please mail this application, cheque to:

Manitoba Gerontological Nursing Association

C/O Joyce Stabner 4554 Main Street West St. Paul, Manitoba R4A 3A1