



Indiana Optometry's Meeting

Embassy Suites, Noblesville, IN • April 19-20, 2024

Please join us at the 127th annual convention of the Indiana Optometric Association!

Exhibitor Date: **April 19-20, 2024**
Location: **Embassy Suites by Hilton Noblesville Indianapolis Convention Center**
13700 Conference Center Drive South, Noblesville, IN 46060

Register by March 15, 2024, to guarantee your name will be included in print materials!

TRADITIONAL TRADE SHOW BOOTHS

Located in the Waters Conference Center, the Exhibit Hall will be open on Friday evening in conjunction with the Welcome Reception and on Saturday afternoon in conjunction with the Trade Show Luncheon.

TWELVE PREMIUM EXHIBIT SPACES

Premium exhibitors have the opportunity to exhibit for two full days, Friday and Saturday, in the hallway outside the lecture hall. Breakfast and breaks will take place in this lobby. The traffic will be heavy, and vendors can talk directly with the doctors for two full days! Only 12 premium spaces are available so be sure to reserve your space early! *Save money if you purchase multiple booth spaces or a Premium exhibit table and Trade Show booth combo.*

Benefits and Opportunities for Exhibitors

- Spend time with Indiana Optometry's Meeting attendees who are optometrists, opticians and optometric staff – eye care is their business!
- Designated show hours for the Traditional Trade Show on Friday evening and Saturday lunch in the exhibit hall
- Premium Table Space – Exhibit for two full days outside the lecture hall in a high traffic area
- Company listing in the IOA convention program book
- Attendee mailing list provided after the event
- Paraoptometrics attending the meeting participate in exhibit functions.
- Discounted hotel room rates – Reserve online at this [link](#) or call Kaley at 317-674-9043 or the Front Desk at 317-674-1900 and use the group code IOA.

Optometrists from across the state will be gathering at the IOA convention! Take advantage of the opportunity to bring meaningful exposure to you, your brand and product offerings! For a complete list of sponsorships, turn to page four of this packet. We are happy to work with you to increase your visibility to Indiana's eye care family.

Fern Exhibitor Services and Ordering Power at Booth

Fern will be serving your booth-related needs at Indiana Optometry's Meeting. Upon receipt of your booth registration at the IOA office, an exhibitor kit will be sent to you. Electrical can be purchased through the hotel - [the order form can be found here](#). For questions about your booth needs, please contact Fern Exhibitor Services at 1-800-774-1251 ext. 1.

Increase Your Visibility!

We invite you to promote your company through other opportunities:

Corporate Sponsorship • Event Sponsorship • Education Sponsorship • Advertising

The Indiana Optometric Association (IOA) is dedicated to actively supporting Indiana Doctors of Optometry by positively impacting advocacy, continuing education, clinical practice, and networking interests.



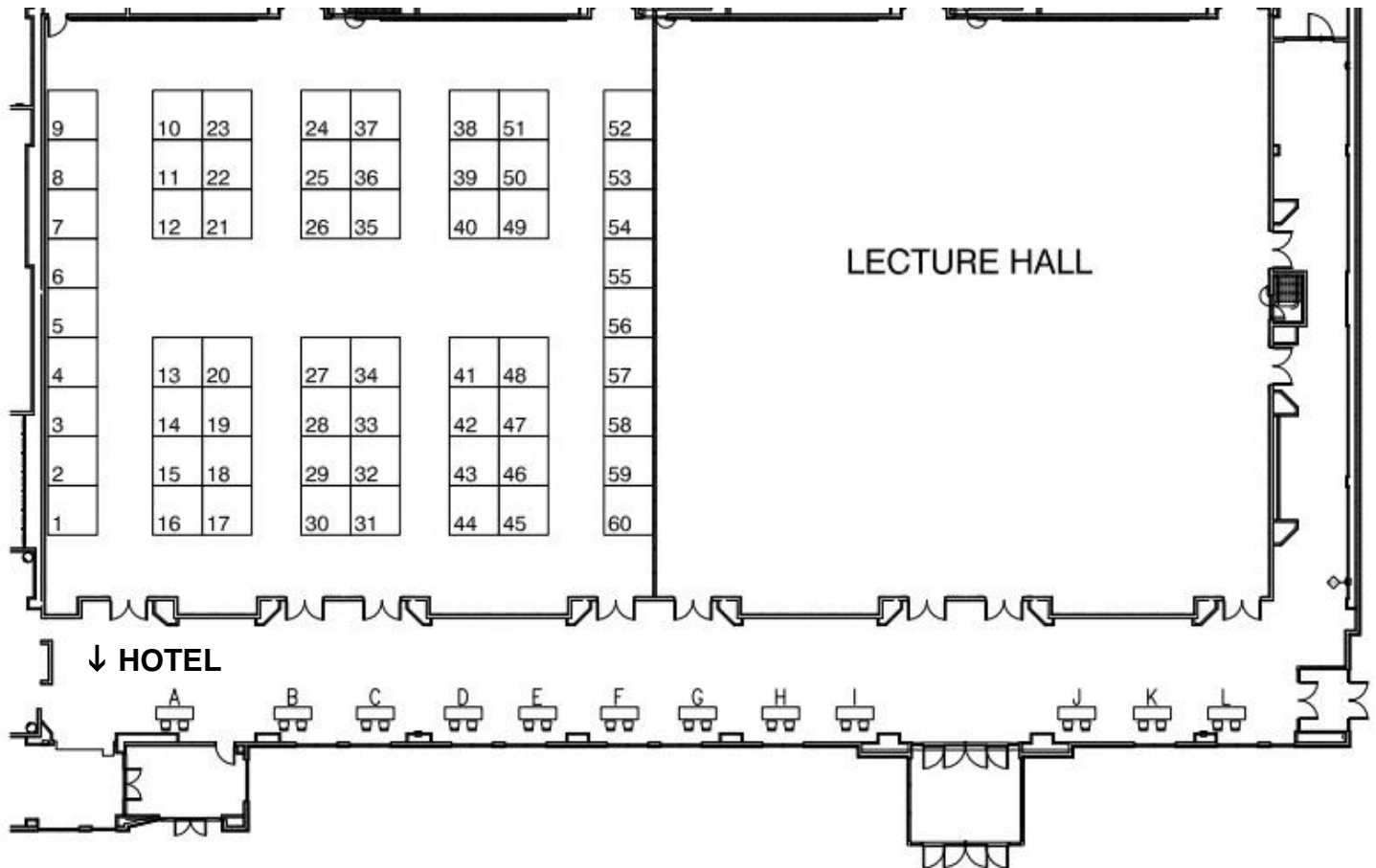
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WATERS CONFERENCE CENTER

60 – 8x8 Booths AND 12 Premium Tables (A-L)

*Please note: Buffet and round tables may be placed throughout the venue.
Booth arrangement subject to change.*





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EXHIBITOR RESERVATION FORM

There are THREE options for exhibitors:

Save \$\$ if you purchase multiple booth spaces or a Premium exhibit table and Trade Show booth combo!

OPTION 1

Premium Table Space (SPACES A-L on the diagram)

Premium Exhibit Hours:

8:00 am to 7:30 pm on Friday, April 19, 2024
7:00 am to 5:00 pm on Saturday, April 20, 2024

Premium Exhibit Location: Hallway in front of Waters Conference Center, where lecture and exhibit hall is located. Premium exhibitors have two full days in a high traffic area.

Premium exhibit tables will be assigned on a first-come, first-served basis. Additional exhibit table space costs are for **same company name only**. [Here is the form to order electrical at your booth.](#)

Please make your selection below. The cost includes one table per exhibitor per exhibit space. Each company will be provided with an ID sign, a table and two chairs and waste basket.

_____ \$2000 = 1 Premium Exhibit space
_____ \$3800 = 2 Premium Exhibit spaces
_____ \$5600 = 3 Premium Exhibit spaces

Exhibit Table # Choices*:

1st _____ 2nd _____ 3rd _____

OPTION 2

Traditional Trade Show Booth (SPACES 1-60 on the diagram)

Traditional Trade Show Hours:

6:00 pm to 7:30 pm on Friday, April 19, 2024
11:00 am to 2:00 pm on Saturday, April 20, 2024

Traditional Trade Show Location: Waters Conference Center

8' x 8' Booths (pipe and drape) will be assigned on a first-come, first-served basis. Additional exhibit booth space costs are for **same company name only**. [Here is the form to order electrical at your booth.](#)

Please make your selection below. The cost includes one table per exhibitor per booth space. Each company will be provided with an ID sign, a table and two chairs and waste basket. Side rails may NOT be removed on the end aisle. Your display materials must fit in your booth space.

_____ \$1200 = 1 Booth space
_____ \$2300 = 2 Booth spaces
_____ \$3400 = 3 Booth spaces
_____ \$4500 = 4 Booth spaces

Booth # Choices*:

1st _____ 2nd _____ 3rd _____

OPTION 3

Premium Exhibit Space and Traditional Trade Show Booth Combination

_____ \$ 3100 = One Premium table and one 8 x 8 booth space

Booth and Table # Choices: 1st _____
2nd _____ 3rd _____

**Exhibit tables and booths will be assigned in order of receipt of application and payment. If you request a Premium space and the Premium spaces are full, you will be assigned a traditional trade show space. If you request more than one booth space/Premium space and the number of spaces you request is not available, you will be assigned the next lowest number available. Any overpayment will be refunded.*

Please note: No shared booths or exhibit spaces between companies.



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DRIVE TRAFFIC TO YOUR BOOTH AND ENHANCE YOUR VISIBILITY

Provide a Raffle Prize

Your company will be recognized in our handout materials as a raffle participant. A representative will stop at each participating booth when you draw names and will announce the winner on the speaker system during the Saturday Trade Show Luncheon.

Annual Corporate Sponsorships

Platinum	\$15,000 (includes 3 free booths)
Gold	\$10,000 (includes 2 free booths)
Silver	\$5000 (includes 1 free booth)
Bronze	\$2500 (50% discount on booth space)

Become an annual corporate sponsor of the IOA and receive maximum exposure to our members throughout the year. Annual sponsors receive free or discounted booth space at our convention, advertising and much more! Sign up in early 2024 to get the most out of this yearlong sponsorship!

Find out more at <https://www.ioa.org/sponsorship.php>

Convention Sponsorships

Convention sponsors will be recognized in event marketing materials (if publication deadlines are met) and on-site.

All sponsorships may include a co-sponsor. Exclusive sponsorships available at additional cost.	Cost	Check
Friday Continuing Education Breaks	\$1500	
Saturday Continuing Education Breaks	\$1500	
Saturday Paraoptometric CE Breaks	\$1000	
Past Presidents' Breakfast	\$1000	
Speaker Sponsor/Unrestricted Educational Grant*	TBD	
Pens, Highlighters, Notepads*	-----	
Badge Holders/Lanyards*	\$1500	
Wifi password sponsor (only one)	\$1000	
Custom hotel key cards (only one)	\$5000	

*See the following page for details.

The sponsorships listed below include a 5-10 minute speaking opportunity.

House of Delegates Meeting	\$2500	
Friday Awards Luncheon	\$5000	
Friday Night Welcome Reception	\$5000	
Friday Night Social Event	\$5000	
Saturday Trade Show Luncheon	\$5000	

Sponsorship Highlights

The IOA will work with you on ways to highlight your organization or product! Sponsor a social outing or reception to show your support of Indiana optometrists!

House of Delegates Meeting \$2500

The ultimate authority for the IOA is the House of Delegates, which meets once per year. This meeting will be held at breakfast on Friday, April 19. Sponsorship includes a 5-10 minute presentation to 50-75 House of Delegates members in attendance.

For more information, contact:

Lisa Sheridan
Director, Marketing & Communications
ls Sheridan@ioa.org
317-237-3560



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Continuing Education Speaker Sponsor/Educational Grant

Interested in sponsoring a speaker? We would be happy to discuss this option with you. Our speakers present CE that is accepted by the Indiana Optometry Board for license and legend drug certificate renewal requirements. Sponsors donate funds in the form of an unrestricted educational grant to cover the speaker's hotel, travel and honorarium.

Provide Pens, Highlighters and/or Notepads for Attendees

Increase name recognition by supplying materials to be handed out at the meeting registration table or in attendee bags. This is a great way to let attendees know that you support Indiana Optometry! Please donate 350 of each item. You are responsible for the cost, production and shipment of the items.

Provide Badge Holders/Lanyards for Attendees - \$1500

Put your logo around the necks of all attendees at Indiana Optometry's Meeting! This is a great way to brand your company: a walking banner. Production, design, shipping and labor costs are not included in the price. Sponsor should provide a minimum of 350 lanyards.

Wifi Password Sponsor (only one) - \$1000

You can designate the password for the lecture hall Wifi during the meeting.

Custom Hotel Key Cards - \$5000

Design a hotel key card for this event to be distributed to all attendees in our room block. Deadline to purchase this sponsorship is February 14.

Print Advertising

Place your ad in our continuing education handbook which is distributed to all registered attendees. This is a great way to boost your visibility, promote a show special or guide attendees to your booth! Reservation and artwork due by March 1, 2024. **Bonus** - The same ad will appear in the 2024 Fall Seminar handout at no extra charge.

Rates

	<u>Convention/Fall</u>	<u>4 Event Books</u>
Half Page - no special placement, B&W only	\$400	\$700
Full page - no special placement, B&W only	\$700	\$1,000
Full page - front inside cover, color (1 available)	\$1,200 SOLD	\$1,700
Full page - back inside cover, color (1 available)	\$1,200	\$1,700
Full page - back cover, color (1 available)	\$1,500	\$2,000

Ad Specs

Full page ad: 7.5" W x 10" H
Half page ad: 7.5" W x 4.75" H

Please submit ads in high resolution JPEG, EPS or PDF

E-Blast Advertising

The IOA E-newsletter is sent to all IOA members on an as-needed basis one to two times per month. Please submit ads as a JPEG. One edition is \$250; two editions, \$450.

Note to Print and Eblast Advertisers: Payment for advertising must accompany order. All copy submitted is subject to the acceptance and final approval of the IOA. The IOA will not accept responsibility for the preparation of negatives, artwork or special typesetting. Space and positions will be assigned on a first-come, first-served basis.



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TERMS AND CONDITIONS OF EXHIBITOR REGISTRATION AND CONTRACT

Contract for Space: Application for space and its acceptance constitute a contract to use the space assigned. Payment is due with the registration form. Booth space will not be reserved until such time as payment is received. Booth numbers will be assigned based on the date the original reservation and payment are received by the Indiana Optometric Association.

The Indiana Optometric Association reserves the right to screen products and equipment offered for display. The Indiana Optometric Association reserves the right to refuse any application for Exhibitor space, if in the opinion of the Executive Committee, the items or services to be displayed are not in keeping with the overall purposes of Indiana Optometry's Meeting and the Exhibit Hall.

Registration: Payment of the booth fee provides two representative registrations per booth. Everyone must be registered and have a name badge to attend Indiana Optometry's Meeting. For your own security, there will be no exceptions. Registration for additional booth personnel should be received by the Indiana Optometric Association on or before March 22, 2024. Additional registrations (more than 2 per booth) are available for \$50 each. Exhibitors may have no more than four booth personnel per space.

Cancellation: If cancellation by the exhibitor is required, notice of cancellation must be in writing and must be received by the Indiana Optometric Association, with verification of receipt not later than March 15, 2024. A \$75 processing fee will be assessed on any refunds. No refunds will be issued for notices of cancellation received after March 15, 2024. This amount is considered to be liquidated and agreed upon damages for the injuries the Indiana Optometric Association will suffer as a result of exhibitor's cancellation. This provision for liquidated and agreed upon damages is a bona fide provision and not a penalty.

In the event of cancellation due to fire, strikes, government regulations, pandemic or other causes beyond Indiana Optometric Association control, the Indiana Optometric Association shall not be held liable for failure to hold the annual meeting and exhibit hall as scheduled, and the Indiana Optometric Association shall determine the amount of the exhibit fees, if any, to be refunded.

The Indiana Optometric Association makes no representations or warranties regarding the number of persons who will attend the Trade Show (exhibit hall or premium booth location), such number being impossible to predict accurately at this time. Promotional materials may not be distributed at other IOA convention events.

Use of Space: All activities and exhibitor materials must be confined to the limits of the exhibitor booth. No exhibit shall block or interfere with the direct visibility of an adjoining exhibit. No display shall be higher than 8 feet without written permission. No exhibitor shall assign, sublet, or share space without permission of the Indiana Optometric Association. All exhibitors using sound equipment must maintain volume at levels that will not interfere with other exhibitors. Side rails may not be removed on the end aisle.

Neither exhibitors nor their agents shall injure or deface the walls or floors of the building or booths. Should such damage occur, the exhibitor is liable to the Indiana Optometric Association, Embassy Suites Noblesville, and Fern for any and all necessary repairs.

Liability: The Indiana Optometric Association will not be responsible for the safety of Exhibits from theft, or damage by fire, the elements, civil commotion, or any other cause.

Exhibitor or third party representative shall be fully responsible to pay for any and all damages to property owned by the Embassy Suites Noblesville, their owners or managers, which results from any act or omission of Exhibitor or third party representative. Exhibitor or third party representative agrees to defend, indemnify and hold harmless the Indiana Optometric Association and Embassy Suites Noblesville and their respective owners, managers, officers or director, agents, employees, subsidiaries and affiliates, from any damages or charges resulting from their use of the property, including attorney fees and expenses. Exhibitor or third party representative's liability shall include, without limitation, all losses, costs, damages or expenses arising from or out of or by reason of any accident, property damage, bodily injury or other occurrences to any person or persons or property including the Exhibitor or third party representative, its agents, employees, and business invitees which arise from or out of the Exhibitor's or third party representative's occupancy and use of the exhibition premises, Embassy Suites Noblesville or any part thereof.

Exhibitor or third party representative shall be fully responsible to pay for any and all damages to property owned by Fern.

Exhibitor or third party representative acknowledges that the Indiana Optometric Association and the Embassy Suites Noblesville do not maintain insurance covering Exhibitor's property or injury to person, and that it is the sole responsibility of the Exhibitor to obtain business interruption, property damage, and any other necessary insurance covering such losses by exhibitor.

It is understood and agreed that these terms and conditions are a part of the contract between Exhibitor and the Indiana Optometric Association. Provisions not covered are subject to the decision of the Indiana Optometric Association management.



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CONTACT INFORMATION AND PAYMENT

Please note that there are two distinct exhibit venues. Twelve exclusive **Premium Exhibit Spaces** will be located outside of the lecture hall. The **Traditional Trade Show** will be booths located in the ballroom. Both options present unique opportunities to interact with the meeting attendees. **PLEASE INCLUDE YOUR RESERVATION FORM WITH PAYMENT. YOUR SPACE WILL NOT BE RESERVED UNTIL PAYMENT IS RECEIVED.**

Company Name: _____

Name as it should appear on exhibit space sign and program: _____

Will you provide a raffle prize during the trade show? Circle: Yes No

Please indicate the nature of your service or business by checking one or more of the boxes below. This will enable us to set up exhibitor space appropriately.

- | | | |
|--|---|--|
| <input type="checkbox"/> Frame Representative | <input type="checkbox"/> Lens Case Company | <input type="checkbox"/> Pharmaceutical Sales |
| <input type="checkbox"/> Consultants | <input type="checkbox"/> Laboratories | <input type="checkbox"/> Insurance |
| <input type="checkbox"/> Instruments | <input type="checkbox"/> Contact Lens Distributor | <input type="checkbox"/> Contact Lens Manufacturer |
| <input type="checkbox"/> Practice Marketing/Management | <input type="checkbox"/> Other _____ | |

Contact Name: _____ *(all correspondence, email, etc., will be sent to this person)*

Email: _____

Address: _____

City: _____

State: _____ Zip: _____ Phone: () _____ Fax: () _____

Website: _____

X (Twitter) address: _____

Booth Manager: _____ Email: _____

Local Rep: _____ Email: _____

Address: _____

City: _____

State: _____ Zip: _____ Phone: () _____ Fax: () _____



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Additional Representatives

Each Premium exhibit space or Traditional Trade Show booth is entitled to two representatives. Add \$50 for each representative exceeding two. Names of all representatives must be provided to the IOA prior to March 22, 2024.

Additional representatives _____ (number) @ \$50 each \$ _____
(Friday night reception and Saturday lunch included for all paid representatives.)

Additional Support (Please specify)

\$ Amount

Sponsorship _____

Advertising _____

Other _____

PAYMENT INFORMATION

☐ I have read and agree to the Terms and Conditions of Exhibitor Registration and Contract of Indiana Optometry's Meeting.

_____ **Check is enclosed in the amount of \$** _____ (Payable to the Indiana Optometric Association.)

_____ **Check here for an email with an invoice link to pay online**

_____ **Paying by VISA/MasterCard (We do not accept American Express or Discover.)** Please do NOT email your credit card information. You can fax 317-237-3564, send by mail or request an online link for payment.

Visa or MC	Account/Card Number	Expires (Month/Year)	CVV (3-4 digit code)

Name on Card (PRINT)	\$ Amount

I hereby authorize the above amount to be charged.

Signature: _____ **Date:** _____

Reminder: Please include your reservation form with contact information and payment.

Mail: Indiana Optometric Association
275 N. Medical Drive, #3363
Carmel, IN 46082

Fax: (317) 237-3564

Email: ls Sheridan@ioa.org

THANK YOU FOR SUPPORTING INDIANA OPTOMETRY!

Questions? Contact Lisa Sheridan at ls Sheridan@ioa.org or 317-237-3560.