

**25<sup>th</sup> Big Island Annual Healthcare Symposium**  
**Advancing Healthcare Changes Needed by Our Community**  
The Fairmont Orchid Waikoloa, Hawai'i Island – Hawai'i  
August 16, 17 & 18, 2024

**Sponsorship & Exhibitor Benefits**

**Platinum Sponsorship – \$17,500**

- Premier recognition at all key events (Approved signage and acknowledgement)
  - Friday Evening Pau Hana, Plenary Sessions, Breakfast & Refreshment Breaks
- Promotional Video/Slides Pre/Post Plenary Sessions (1-2 Minutes)
- Three (3) Complimentary Exhibit Tables
- Logo and Premier Acknowledgement in Program Materials
- Twenty (20) Complimentary Conference Attendees (Representatives)\*

**Gold Sponsorship – \$12,500**

- Recognition at all key events (Approved signage and acknowledgement)
  - Plenary Sessions, Breakfast & Refreshment Breaks
- Promotional Video/Slides Pre/Post Plenary Sessions (1 Minute)
- Two (2) Complimentary Exhibit Tables
- Logo and Acknowledgement in Program Materials
- Ten (10) Complimentary Conference Attendees (Representatives)\*

**Silver Sponsorship – \$10,000**

- Recognition & Approved Signage
- Recognition at Plenary Sessions
- Promotional Video/Slides Pre/Post Plenary Sessions (30 Seconds)
- One (1) Complimentary Exhibit Table
- Logo and Acknowledgement in Program Materials
- Five (5) Complimentary Conference Attendees (Representatives)\*

**Exhibit Table – \$3,500**

- Recognition at Plenary Sessions
- One (1) Exhibit Table
- Logo and Acknowledgement in Program Materials
- Two (2) Complimentary Conference Attendees (Representatives)\*

**\*Additional Conference Attendee (Representative) - \$200**

**Special Events – \$2,500 (Available only to Sponsors/Exhibitors)**

- Complimentary meeting room for a lunch-time meeting on Saturday, August 17.
- All participants in your meeting MUST be registered conference attendees.
- Fee does NOT include cost of meals or audio visual equipment, which will be extra.
- We will assist with the planning of your special event (help you select meals and arrange audio visual equipment).

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**Sponsorship & Exhibitor Registration**

Company: _____	Key Contact Person: _____
Professional Title: _____	Position: _____
Contact Address: _____	
Contact Number (W): _____	Contact Number (C): _____
Fax: _____	Email: _____

SPONSORSHIP LEVEL			AMOUNT
<b>Platinum</b>	3 Complimentary Tables/20 Attendees (Reps)	\$17,500	\$
<b>Gold</b>	2 Complimentary Tables/10 Attendees (Reps)	\$12,500	\$
<b>Silver</b>	1 Complimentary Table/5 Attendees (Reps)	\$10,000	\$
	<b>Additional Attendees (Reps) _____</b>	\$200 (per person)	\$
<b>TOTAL:</b>			<b>\$</b>

EXHIBIT TABLES			AMOUNT
<b>Exhibit Table</b>	1 Exhibit Table/2 Attendees (Reps)	\$3,500 (per table)	\$
	<b>Additional Attendees (Reps) _____</b>	\$200 (per person)	\$
<b>TOTAL:</b>			<b>\$</b>

SPECIAL EVENTS*			AMOUNT
<b>Special Event</b>	Available only to Sponsors/Exhibitors	\$2,500 per event	\$
<b>TOTAL:</b>			<b>\$</b>
Please email Micole Evans at <a href="mailto:mevans@ehiipa.com">mevans@ehiipa.com</a> for more information			

**Grand Total Due: \$ \_\_\_\_\_**

**Please list ALL conference attendees (representatives) attending on page 3**

**Sponsorship & Exhibitor Registration Form and Conference Attendees List must be submitted via email to: [easthawaiiipa@gmail.com](mailto:easthawaiiipa@gmail.com) or faxed to 808-935-4472 by July 31, 2024**

Payment may be made by check (see below) or credit card online at our website:  
[Sponsors and Exhibitors – Big Island Docs – East Hawaii IPA](#)

Please make checks payable to: East Hawaii I.P.A. dba Big Island Docs  
Mailing Address: 670 Ponahawai St., Suite 117 Hilo, HI 96720

The East Hawaii IPA’s Tax Identification Number (TIN) is: 99-0310967

**Questions?** Please contact us at: Email: [bigislanddocs@ehiipa.com](mailto:bigislanddocs@ehiipa.com); Website: [www.bigislanddocs.com](http://www.bigislanddocs.com)  
Direct Line: 808-797-3113; Fax: 808-935-4472

**Conference Attendees (Representatives)**  
**Will appear on name badge as written below**

<b>NAME (First and Last)</b>	<b>TITLE (MD, APRN, PA, DO, MBA, etc.)</b>	<b>POSITION</b>	<b>EMAIL</b>	<b>Company Name (if different than sponsor/exhibitor company name)</b>

**Please attach additional pages if needed.**

**Organizer East Hawaii I.P.A. (Big Island Docs) and Exhibitor/Sponsor Agreement**

Terms of use and participation (this “Agreement”):

- 1) Acceptance and direction at sole discretion of Organizer including as to:
  - signage location and type including symbols, identifying marks, size, color, and lettering
  - exhibit table location
  - setup and take down according to Organizer requirements
- 2) Cancellation: Subject to cancellation, except as provided below, only upon the consent of Organizer at its sole discretion.
- 3) Cancellation Policy
  - a. After signature: 25% cancellation fee
  - b. 90 days prior to event, 50% cancellation fee
  - c. After 90 days prior to the event, all monies are forfeited
- 4) Notwithstanding an Act of God, or other circumstance beyond the control of either party, the terms and conditions as noted will remain in full force.
- 5) Insurance & Liability: Exhibitor/Sponsor agrees and acknowledges that it is responsible for safeguarding its possessions, materials and property during the event. Exhibitor/Sponsor shall be responsible and liable for any loss (including consequential losses), damage or claims arising out of injury to members of the public or damage to any persons’ property, materials or possessions by reason of the works, acts or omissions of Exhibitor/Sponsor, its employees, servants or agents and for any loss or damage (including without limitation consequential losses) caused to the venue, and to any third parties howsoever arising as a result of the acts or omissions (or failure to act) of Exhibitor/Sponsor, its employees, sub-contractors or agents. Organizer expressly declines any liability for the safety of possessions, materials, or property of Exhibitor/Sponsor or its employees, contractors, suppliers and agents or any other person, for loss, damage, destruction by theft, fire or any other cause, save and except any death or personal injury caused by Organizer’s negligence. Exhibitor/Sponsor agrees and undertakes to secure its own insurance to cover all liabilities and risks including personal, public and product liability claims.
- 6) Disputes: Any dispute, disagreement or interpretation of the terms and provisions of this Agreement shall be determined by binding arbitration in accordance with the commercial arbitration rules then in effect of Dispute Prevention & Resolution, Inc. In any such proceeding the determination of the arbitrator shall be binding and the parties shall have no right of appeal. The arbitration award may be entered as a judgment in any court of competent jurisdiction. The arbitration hearing shall be held in Hilo, Hawaii and be governed by the laws of the State of Hawaii. The arbitrator may award the prevailing party reasonable attorney's fees, costs and administrative fees.
- 7) Waiver: Failure or neglect by Organizer to enforce at any time any of the provisions hereof shall not be construed nor shall it be deemed to be a waiver of their rights hereunder nor in any way affect the validity of the whole or any part of this Agreement nor prejudice Organizer’s rights to take subsequent actions.
- 8) Subject to Venue Requirements: This Agreement is subject to the Organizer’s agreement with the hotel site and the rules and regulations of the hotel and Organizer as to the use of the hotel premises.
- 9) Assignment and Subletting: Exhibitor/Sponsor shall not assign this Agreement or sublicense all or any part of the Exhibitor/Sponsor space, except with the prior written consent of Organizer (which consent Exhibitor/Sponsor agrees Organizer may withhold or deny in Organizer’s sole or arbitrary discretion).

**AGREED AND ACKNOWLEDGED:**

Exhibitor/Sponsor Signature: \_\_\_\_\_

Print Name of Individual Signing this Agreement: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_