



## National Association of Indian Nurses of America (NAINA)

P.O. Box 3002, North Lake, IL 60164.

[www.nainausa.com](http://www.nainausa.com)

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**Awards:** Lilly Anickatt

**Bylaws:** Dr. Rachel Zachariah

**Membership:** Haridas Thankappan

**Editorial:** Dr. Laly Joseph

**Communication:** Suja Thomas

**Election:** Mary Philip

**Education:** Dr. Alphonsa Rahman

**Research & Grant:**

Dr. Anne B Luckose

### *Appeal for Vendor Exhibitor/ /Advertisement*

Dear Sir/Madam,

National Association of Indian Nurses of America (NAINA) is a non-profit organization under section 501(c) 3, with the primary goal of uniting all nurses of Indian heritage. We facilitate professional growth, identify and pursue the unique professional, social and cultural needs of our members.

It is with great pleasure we announce that our Clinical Excellence Conference is scheduled as follows:

**Saturday, November 2, 2019**

**8:00 am to 4:00 pm**

**Fair Bridge Hotel & Conference Center, 130 NJ-10, East Hanover, NJ 07936**

**Theme: "Population Health: Bridging Gaps and Improving Access to Care"**

At this conference, we are expecting about 100-150 Registered Nurses, Advanced Practice Nurses, Nurse Faculty from all over the United States. The conference has opportunities for your company to sponsor at different levels. The conference would be a great time to network with nurses. Our vendor booth space will give your company an opportunity to physically present and showcase your product.

I appreciate and look forward to your support by way of conference sponsorship and/or advertisement in our Conference Journal.

Sincerely,

Dr. Agnes Therady

President, NAINA



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Level of Sponsor	Incentives	Vendor Booth	Meal plan
<b>Grand Exhibitor</b> <b>\$2,000.00</b>	<ul style="list-style-type: none"> <li>Signage at registration and in conference hall.</li> <li>Company mentioned as presenting partner in event press releases, media interviews and photos.</li> <li>Opportunity to provide promotional items to all event attendees</li> </ul>	2 table booth space	2 tickets for lunch
<b>Platinum Exhibitor</b> <b>\$1500.00</b>	<ul style="list-style-type: none"> <li>Signage at registration and in conference hall.</li> <li>Company mentioned as presenting partner in event press releases, media interviews and photos.</li> <li>Opportunity to provide promotional items to all event attendees</li> </ul>	1 table booth space	2 tickets for lunch
<b>Gold Exhibitor</b> <b>\$1250.00</b>	<ul style="list-style-type: none"> <li>Signage at registration and in conference hall.</li> <li>Company mentioned as presenting partner in event press releases, media interviews and photos.</li> <li>Opportunity to provide promotional items to all event attendees</li> </ul>	1 table booth space	2 tickets for lunch
<b>Silver Exhibitor</b> <b>\$750.00</b>	<ul style="list-style-type: none"> <li>Signage at registration and in conference hall.</li> <li>Company mentioned as presenting partner in event press releases, media interviews and photos.</li> <li>Opportunity to provide promotional items to all event attendees</li> </ul>	1 table booth space	1 ticket for lunch

## **Additional Exhibitor**

### **Vendor Booth/ Sizes/ rates**

One booth space	Two Booth Space	Three Booth Space
\$250	\$500	\$ 650

*Booth space provides 6 feet table dresses with tablecloth and skirt, & 2 chairs*



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**VENDOR EXHIBITOR APPLICATION**

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

**Indicate level of Vendor Exhibitor:**

Grand sponsor \$ 2,000 \_\_\_\_\_

Platinum sponsor \$1,500 \_\_\_\_\_

Gold Sponsor \$1,250 \_\_\_\_\_

Silver sponsor \$750 \_\_\_\_\_

**Deadline for  
submission:  
10/2/2019**

**Additional Level of Booth Space**

One booth space \$250 \_\_\_\_\_

Two booth space \$500 \_\_\_\_\_

Three booth space \$650 \_\_\_\_\_

**Enclose check: Payable to NAINA**

**Amount enclosed:** \_\_\_\_\_

Mail to: Kavita Natarajan, Treasurer

**21 Forest Lane, Branchburg, NJ, 08853**

Signature: \_\_\_\_\_ Date \_\_\_\_\_

We appreciate your business with NAINA, support and participation promoting the education of Nurses.

**THANK YOU**

**2019 NAINA CLINICAL EXCELLENCE CONFERENCE PLANNING COMMITTEE**

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NAINA official use only

Received by: \_\_\_\_\_

Check No \_\_\_\_\_

Date \_\_\_\_\_



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**ADDITIONAL SPONSORSHIP for NAINA Journal Advertisements**

Full Page Color	\$500
Half page Color	\$ 250
Quarter Page Color	\$125
Full Page for NAINA Chapters	\$ 150

Advertisements must be received by **October 2, 2019** to be included in the Journal  
Please submit electronically, high resolution in jpg or pdf or doc format to:  
**nainajc2016@gmail.com**

**PAYMENT INFORMATION**

Enclose check payable to NAINA  
Mail to: Kavita Natarajan, 21 Forest Lane, Branchburg, NJ 08853

**Please complete the following in**

**Company Name:** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Contact Person** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Amount enclosed: \$** \_\_\_\_\_

**Received by** \_\_\_\_\_ **Check No** \_\_\_\_\_ **Date** \_\_\_\_\_

**Indicate type of Vendor Exhibitor** \_\_\_\_\_