Nursing Students' Association of New York State

Website

Nursing Students' Association of New York State 74th Annual Convention
Saturday, February 21st, 2026
Hilton Long Island Huntington @ 598 Broadhollow Rd, Melville, NY 11747
Precision In Practice

Exhibitor Information Packet and Contract with Payment
Due by Sunday, January 25th, 2026

CONTRACT

- **This packet may be completed and sent via email**.
- If you choose to register and pay, you must email a signed contract to vicepres.nsanys@gmail.com

NON-REFUNDABLE PAYMENT

- One Registration Per Exhibitor and/or Sponsor
- Payment only by check. It must be **postmarked** by **Sunday, January 25th, 2026.**

(address on page 6)

Nursing Students' Association of New York State

Website

Section I: CONTRACT FOR EXHIBITORS/VENDORS

Exhibitors will be provided with:

- A 6-ft. table with a black linen tablecloth
- One or Two Chairs dependent on package level
- One or Two complimentary conference passes dependent on package level (Breakfast, Lunch, and snacks included)*
- Only exhibitors who have purchased the Platinum Exhibitor Package will have a choice in their exhibit table location.
- All of the amenities provided within the purchased package. Refer to Exhibitor Package table on page 4.

Exhibit Space:
Tables are limited to the 6-ft. table with a black linen tablecloth provided in your area. Placing materials, banners, posters, stands, or any other furniture or promotional materials outside of the tabletop exhibit is prohibited. Promotional materials may not block the view of other exhibit tables. Materials may not be placed on walls or floors around the table. Electronic outlets and/or devices are not to be provided by the NSANYS and are at the discretion of the hotel facility.

Cancellation:
No refunds will be made for cancellations.

Installation of Exhibits:
No storage space will be provided for exhibitor materials. No refuse may be placed in aisles after the final cleaning. Please do not litter the floor in the booths or aisles after cleaning. Wastebaskets will be available near booths. Set-up time will be at the discretion of the convention center. Installation information will be provided after registration is complete.

Dismantling:
No packing or dismantling of exhibits will be permitted prior to 3:30PM.

Liability:
The NSANYS, the facility, nor their agents can assume responsibility for any loss of damage to booths, equipment, or personal belongings on-site. All exhibits are the responsibility of the exhibitor. Neither the NSANYS nor its constituents will assume any responsibility for property loss, damage, personal injury, or other claims related to the exhibitor's space.

Soliciting:
When collecting personal data from attendees, exhibitors are required to disclose how the information will be used and shared with others. No foods or beverages may be distributed to attendees in the exhibit hall or in any activity associated with NSANYS.

Nursing Students' Association of New York State

Website

Termination of Exhibit Rights:
In the event the exhibitor, or any of its contractors, fails to comply with any of the facility or contract regulations, the NSANYS reserves the right to terminate the exhibitor's display, evict and remove the exhibitor and contractors from the premises. In such an event, the exhibitor will not be entitled to any refund of amounts paid.
In the event of an unforeseen circumstance (such as inclement weather) resulting in cancellation of the event by NSANYS, this contract may be terminated resulting with a refund of your payment. In any other circumstances your payment would not be refunded.

Prohibited Practices:

- Distributing/advertising materials outside the exhibitor's own booth
- The use of billboard advertisements and/or display of signs outside the exhibit area and/or that hinders other exhibitor's displays
- Demonstrations or displays away from the exhibit area during exhibit hours

By signing below, I certify that I have read the above and fully understand and accept the terms and conditions of the Nursing Students' Association of New York State.

Representative Name	Representative Signature	Date
Maya Matar Co-Vice President '25-'26, NSANYS	Signature	Date
Adnan Kamal Co-Vice President '25-'26, NSANYS	Signature	Date

Name of Exhibitor/Organization:_____

Nursing Students' Association of New York State

Website

Exhibitor Hall Package Options

Please indicate the level at which you would like to participate.

Circle **ONE** option:	
Bronze Package - Exhibitor $500	• Exhibit Hall Booth (1 Staff Member) • Listing in convention program highlights • Honorable Mention in the NSANYS STAT Newsletter • Advertisement on the NSANYS Website
Silver Package - Exhibitor $1000	• Exhibit Hall Booth (1 Staff Member) • Listing in convention program highlights • Honorable Mention in the NSANYS STAT Newsletter • Advertisement on the NSANYS Website • A full-color ¼ page advertisement in the convention program
Gold Package - Exhibitor $1500	• Exhibit Hall Booth (2 Staff Members) • Listing in convention program highlights • Honorable Mention in the NSANYS STAT Newsletter • Advertisement on the NSANYS Website • Breakout Session Sponsorship • Promo item in convention bag *mailed at least 1 week in advance* • A full-color ½ page advertisement in the convention program • Thank-you mention at closing ceremony
Platinum Package - Exhibitor $2500	• Exhibit Hall Booth with selection of space (2 Staff Members) • Priority listing in convention program highlights • Honorable Mention in the NSANYS STAT Newsletter • Advertisement on the NSANYS Website & Social Media Accounts • Promo item in convention bag *mailed at least 1 week in advance* • A full-color 1 page advertisement in the convention program • Thank-you mention at closing and opening ceremony • On stage personal recognition & photo op with our President at lunch reception • Recognition of sponsorship level at your exhibit table • Advantageous table location in the exhibitor hall

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Website

Section II: Registration Form

The Nursing Students' Association of New York State (NSANYS) may, at its discretion, accept or reject any application for exhibit space.

Name of Organization: _____

Package Chosen: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Website: _____

Name of Contact Person: _____

Title: _____

Email: _____ **Phone Number:** _____

Representatives Attending: First and Last Name

Printed:_____ Signature:_____ Date: _____

Printed:_____ Signature:_____ Date: _____

Printed:_____ Signature:_____ Date: _____

FOR TIMELY PROMOTION, PLEASE EMAIL YOUR LOGO TO:

VICEPRES.NSANYS@GMAIL.COM

SUBJECT: EXHIBITOR NAME, [INSERT YOUR EXHIBITOR PACKAGE]

Section III: Payment

Payment:

Via mail	Mail completed check payable in U.S. Funds to: Juwan Chee, Treasurer Nursing Students' Association of New York State (NSANYS) P.O. Box 340087 Jamaica, NY 11434

On behalf of the Nursing Students' Association of New York State,
We thank you for participating in our 74th Annual Convention!

Sincerely,
2025-2026 Nursing Students' Association of New York State Board of Directors