



Senior Health & Wellness Expo

Ambassador Health's 9th Annual Senior Health & Wellness Expo is part of a national movement centered around the mental, physical, and emotional well being of our community senior adults.

Today's active senior adults are living longer, more fulfilling lives. More than any other generation before them, they are searching for new and different ways of getting the most out of life. Your products and services are exactly what they are looking for!

SENIOR HEALTH & WELLNESS EXPO
Wednesday, May 18, 2016
9:00 AM - 12:30 PM
Ambassador Wellness Center
1240 N. 19th Street, Nebraska City, NE 68410

Do not miss this opportunity to tell your story to senior adults from southeast Nebraska and southwest Iowa, as well as the other participating businesses and organizations.

As an Exhibitor, you will receive:

- 9' wide x 6' deep booth space
- One 8' covered table with two chairs
- Morning refreshments and lunch

The cost for an exhibit space is \$45. Additional tables (\$20/each) and chairs (\$5/each) may be purchased. Electricity is limited and will be available on a "first come, first serve" basis for an additional charge of \$15 per exhibit; exhibitors must make prior arrangements for electricity.

Space is limited, so reserve your exhibit booth today! Complete the enclosed registration form and return it with your payment by May 4, 2016, to:

Ambassador Health
Attn: Stephanie Farmer
PO Box 640
Nebraska City, NE 68410

Thank you for your time, and we hope to see your organization represented at Ambassador Health's 9th Annual Senior Health & Wellness Expo! Please contact Stephanie Farmer with questions: 402.873.8513, stephanie.farmer@ambhealthsys.com.



Exhibitor Registration

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Company Name: _____

Contact Name: _____

Product/Service: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Staff Attending Expo: _____

To place your booth properly in the room, please answer the following questions:

Do you need electricity (\$15.00)? Yes No

Will you have equipment to demonstrate? If so, what equipment: _____

Will you be providing a health screening? If so, what kind: _____

Check all that apply:

_____ Exhibit Booth: \$45.00

_____ Additional Table(s): \$20.00 each

_____ Electricity: \$15.00

_____ Additional Chair(s): \$5.00 each

Please make check payable to "The Ambassador Group" and mail along with registration form by May 4, 2016, to:

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Nebraska City, NE 68410