

Aging Life Care Association® 2026 Southeast Chapter Conference
Bridging the Gaps – Connecting Care, Culture, and Community

SPONSOR/EXHIBITOR REGISTRATION FORM — October 14 – 16, 2026

Please fill out this form and return with payment no later than August 1, 2026

Sponsorship applications are subject to approval by the conference committee and must include a description of the products/services to be exhibited. If the application is not approved, a full deposit will be returned. Sponsorships are accepted on a first-come basis at the time of payment. You are welcome to select multiple opportunities for maximum publicity.

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| ☐ Rainbow Row Sponsor - \$5,000 | ☐ Angel Oak Kickoff - \$2,500 |
| ☐ Cypress Gardens Sponsor - \$3,000 | ☐ City Market Lunch Sponsor - \$2,500 |
| ☐ Speaker Sponsor - \$950 | ☐ Break Sponsor - \$900 |
| ☐ Scholarship - \$350 | ☐ King Street - \$500 |

ALCA Corporate Partners will receive a 10% discount off fees. I am an ALCA Corporate Partner: ☐ Yes ☐ No
Deadline for all pre-conference publicity is August 1, 2026

Company: _____

Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

All exhibitors/sponsors are entitled to two name badges for representatives to attend the conference.
Please list your exhibiting representatives below.

1. _____ 2. _____

Special Dietary Restrictions? _____ Special Dietary Restrictions? _____

Electrical and Internet Access: Wireless Internet Access will be provided in the exhibit hall.

I anticipate needing electrical access: ☐ **Yes** (Additional charges may apply at the exhibitor's expense). ☐ **No**

I will pay by Check ____ Total Amount Enclosed: \$ _____

Make check payable to: ALCA Southeast Chapter and mail with form to address below.

I will pay by ☐ VS ☐ MC ☐ AX _____ - _____ - _____ Exp Date: __ / __ CVV: _____

Name on Card: _____ Signature: _____

Total Amount Enclosed / Authorized to Charge: \$ _____

Exhibitor Terms and Conditions The exhibitor assumes the entire responsibility for losses, damages, and claims arising out of exhibit's activities on Hotel premises and will indemnify, defend, and hold harmless ALCA Southeast Chapter, the Hotel, their agents, and employees from any and all such losses, damages, and claims. Exhibit space is limited and assigned on a first-come, first-served basis. Cancellations must be received in writing. **No refunds will be issued after August 1, 2026.** Cancellations before that date will receive a refund minus a \$50 administrative fee. **Please note your registration signifies acceptance of all terms and conditions of exhibiting.**

Return form via mail; email to aschachter@aginglifecare.org, or mail /fax by August 1, 2026:

ALCA SE Chapter Conference Exhibitor | 3275 W Ina Rd Suite 130, Tucson AZ 85741 | Fax: 520.325.7925

Questions? Contact Melanie Oliver at moliver@seniorsolutionsnc.com or 252.450.5731

For Staff Use Only – Date Received: _____ Date CC Charge/Check Received: _____