



CORRECTIONAL MANAGEMENT INSTITUTE OF TEXAS
GEORGE J. BETO CRIMINAL JUSTICE CENTER
SAM HOUSTON STATE UNIVERSITY

DOUG DRETKE
EXECUTIVE DIRECTOR

CHRISTIE DAVIDSON
ASSISTANT DIRECTOR

February 13, 2020

Dear Exhibitor:

We are pleased to announce the **7th Annual Mental Health Conference** hosted by the Correctional Management Institute of Texas (CMIT), October 13 - 16, 2020. The past five conferences brought together over 350 corrections and mental health professionals and we anticipate an even greater response this year.

Your exhibit fee of \$350 will include two company representatives per booth, with a six-foot table and two chairs. Additional exhibit personnel from your company may register for an extra \$50.00 per person. Please fill out and return a registration form with each representative's name.

EXHIBITS AND SPONSORSHIPS:

Exhibits will be located in the Courtyard Dallas-Allen, Watters Ballroom, in Allen, Texas. Set up for all exhibitors will be Tuesday, October 13, 2020, from 1:00pm-5:00pm. Exhibits will re-open Wednesday, October 14, 2020 and Thursday, October 15, 2020 from 8:00am-3:30pm.

Booths will be assigned on a first come, first serve basis. Fax or email your exhibitor contract as soon as it is completed. Along with exhibiting your products, please consider sponsorship of conference events as another means of conveying your message to attendees. Companies that want to receive special recognition for their level of participation at the conference should fill out the Sponsorship Form and return it as soon as possible. **Sponsors of conference events will be recognized with signage at each event and also in the conference workbook.**

SHIPPING INFORMATION:

All incoming packages for the conference should be addressed to Courtyard Dallas-Allen, 210 East Stacy Rd., Allen, TX 75002. Please also include the company name, name of the person who will be claiming the packages, as well as the conference name and date (7th Annual Mental Health Conference, October 13 - 16, 2020) on the outside packaging. **No packages should arrive before October 5, 2020.**

HOTEL INFORMATION:

Courtyard Dallas-Allen
210 East Stacy Road
Allen, TX 75002
214-383-1151

We are planning a great conference and hope you will be a part of it. Please feel free to contact me should you have questions or require assistance. See you in Allen!

Aimee Crockett
Project Coordinator
Phone: (936) 294-3073
Fax: (936) 294-1671
Email: acrockett@shsu.edu



EXHIBITION CONTRACT

7th Annual Mental Health Conference

October 13 – 16, 2020 | Allen, TX

Instructions: Complete all information blanks. Sign, date, and mail with check made payable to the Correctional Management Institute of Texas, George J. Beto Criminal Justice Center, Sam Houston State University, Huntsville, TX 77341-2296, or call 936-294-3073 or 936-294-1687 or e-mail acrockett@shsu.edu for more information.

Signed contract and fee must be received by **September 1, 2020**, in order to reserve exhibit space. Your payment must be received within 30 days, or your booth space will be released. If you need to discuss payment options, booth locations, special sponsorships, or special needs contact **Aimee Crockett at 936-294-3073**, or Sharese Hurst at 936-294-1687.

Company Name to be listed on signage: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Contact Name (printed): _____

Title: _____

Signature: _____ Date: _____

I have enclosed a check or purchase order in the amount of \$_____.

The Correctional Management Institute of Texas, referred to hereinafter as “CMIT,” and the undersigned firm, referred to hereinafter as “Exhibitor,” and Courtyard Dallas-Allen, referred to hereinafter as “Exhibit site,” agree to as follows:

1. CMIT will provide exhibit space in accordance with items listed below:
2. Space will be provided on a **first-come, first-serve** basis for the area of choice. Exhibitor accepts CMIT’s offer and requests the following booth(s) according to the enclosed diagram:

1st Preference # _____ 2nd Preference # _____ 3rd Preference # _____ 4th Preference # _____

Exhibitor desires a total of _____ booth(s), at **\$350 for each booth**, for a total of \$ _____ payable upon return of signed contract mailed to CMIT.

3. Area of expertise: _____

Is there a company that you would prefer to be placed next to? _____

Is there a company that you do NOT want to be placed next to? _____

Do you need electricity from Courtyard Dallas-Allen? _____

4. Names of firm representative(s) attending booth. **Each booth entitles you to 2 company representatives.**
Please print or type name(s) and title(s): **Additional attendees will be \$50.00 each.**

Name: _____ Title: _____

Name: _____ Title: _____

- 5. Exhibitor understands there could be additional charge for power, telephone, special decorations, shipping and storage/handling.
- 6. Exhibitor will accept booth space assignment as determined by CMIT.
- 7. **Exhibitor may cancel the agreement and receive a full refund, minus a service charge of \$100, if written request is received by September 14, 2020. No refunds will be given after this date.**
- 8. CMIT reserves the right to refuse any exhibit or Exhibitor and further reserves the right to shut down any Exhibitor for breach of this agreement, or for cause.

Please copy form and return original along with payment to:

Attn: Aimee Crockett, CMIT Mental Health Conference, George J. Beto Criminal Justice Center,
Sam Houston State University, Huntsville, TX 77341-2296.

Fax: 936-294-1671 **Email:** acrockett@shsu.edu



SPONSORSHIP OPPORTUNITIES

7th Annual Mental Health Conference

October 13 – 16, 2020 | Allen, TX

Dear Exhibitor:

Sponsorship of conference activities is an excellent way to show your support for the Correctional Management Institute of Texas. Your sponsorships allow the Institute to provide more educational activities to participants across the state.

Sponsors of events will be recognized with signage at the event as well as in the participant’s conference packets. Events will be assigned on a first-come, first-serve basis. Indicate choice by placing a number in the corresponding blank with #1 being first choice. Please consider sponsoring/co-sponsoring one of the following events for our attendees.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Title: _____

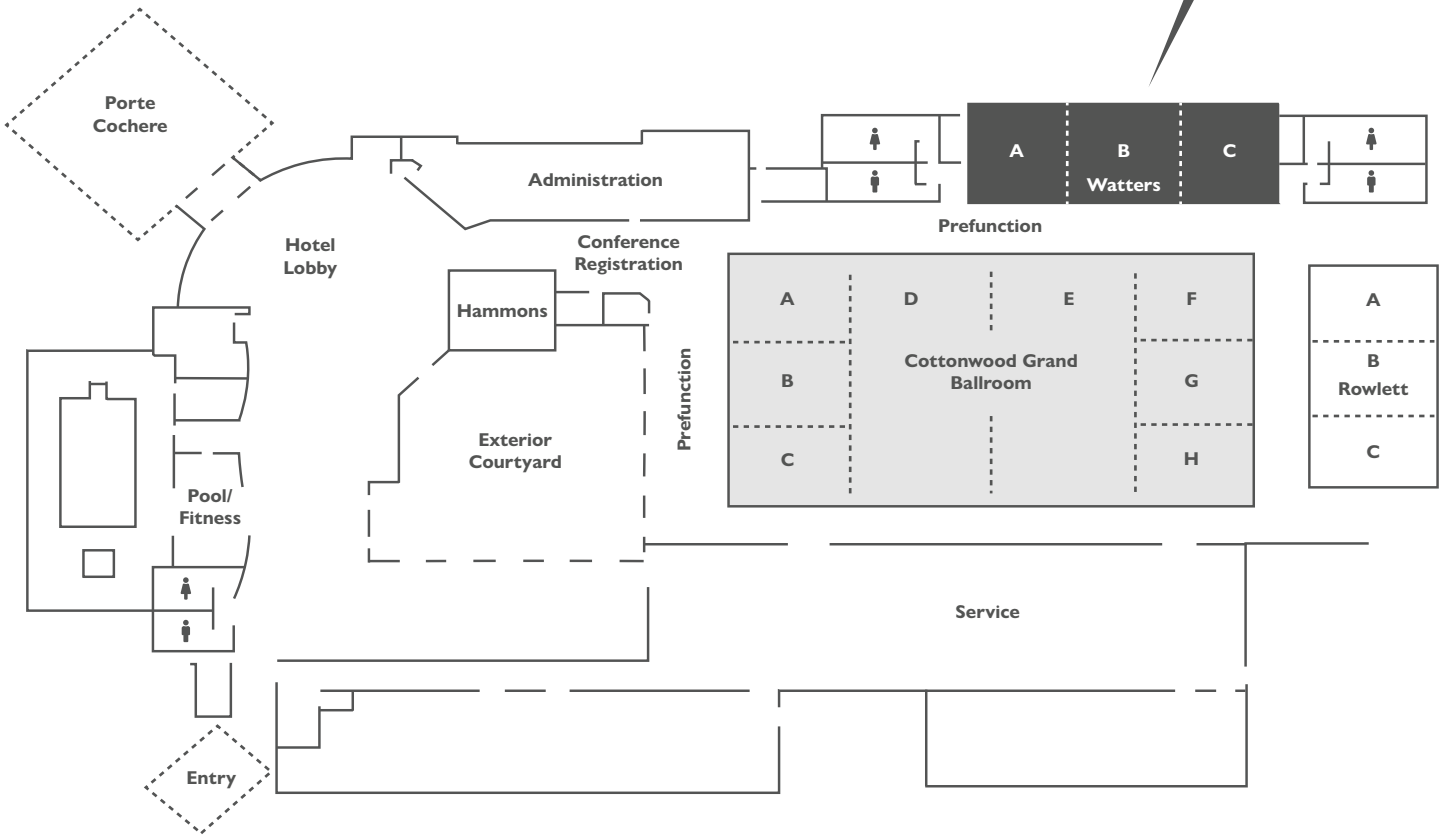
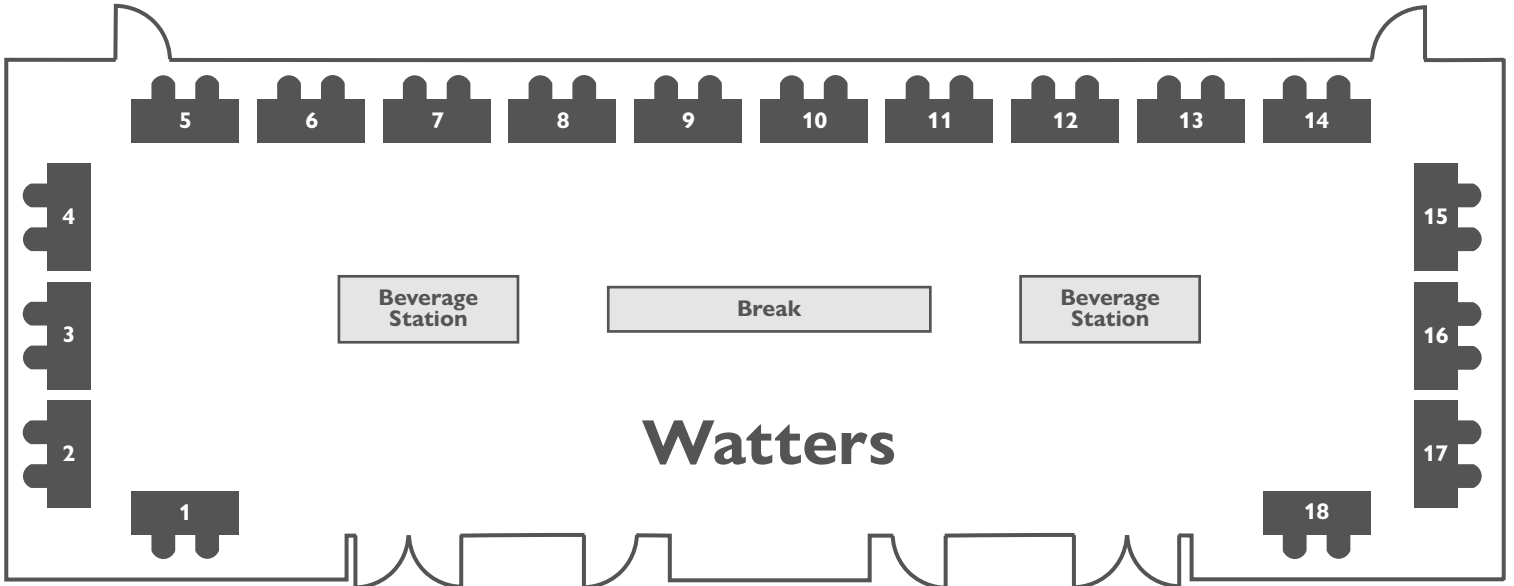
Signature: _____ Date: _____

I have enclosed a check or purchase order in the amount of \$_____.

<u>Event</u>	<u>Full Sponsor</u>	<u>Co-Sponsor</u>
Wednesday, October 14, 2020		
Morning Refreshment Break	_____ (\$2,500)	_____
Afternoon Refreshment Break	_____ (\$2,500)	_____
Thursday, October 15, 2020		
Morning Refreshment Break	_____ (\$2,500)	_____
Afternoon Refreshment Break	_____ (\$2,500)	_____
Friday, October 16, 2020		
Morning Refreshment Break	_____ (\$2,500)	_____
Special Speaker	_____ (\$500)	_____

Thank You for Your Support!

Any questions contact Aimee Crockett
(936) 294-3073 or acrockett@shsu.edu



MHC

