



9th Annual
**NORTH GEORGIA
AUTISM CONFERENCE**

EXHIBITOR PACKAGES

OCT 25, 2024 | DALTON, GA

Dalton Convention Center

2211 Tony Ingle Parkway

Dalton, GA 30720

8:00 AM – 4:00 PM

KEYNOTE SPEAKER



Evan Anderson, PhD

Pediatric Psychologist, Advocate,
Professor of Pediatrics at UVA
Medical School

Hosted by:



**Anna Shaw
Children's Institute**

The 9th Annual Autism Conference is intended for parents/caregivers, educators, healthcare professionals, young adults on the autism spectrum, self-advocates, and other interested individuals. If you would like to attend this event and need assistance with interpretation services and/or auxiliary aids, please indicate when registering.

Register at HamiltonHealth.com/autismconference

Questions? Contact Lindsey Coker at lcoker@hhcs.org or 706.226.8913.



ABOUT THE CONFERENCE

MISSION

- Educate parents/caregivers, educators, healthcare professionals, young adults on the autism spectrum, self-advocates, and other interested individuals about autism spectrum disorders
- Present the latest studies, findings, empirically-based strategies, and treatments
- Advance the skills of professionals and others who work with the autism community
- Connect educators, parents and caregivers, self-advocates, teens and young adults with autism, professionals, medical professionals and others
- Showcase autism-related service providers, connect them with those seeking services, and facilitate collaborations with other organizations in our community

AUDIENCE

This conference is intended for parents/caregivers, educators, healthcare professionals, young adults on the autism spectrum, self-advocates, and other interested individuals.

WORKSHOPS

Participants can choose from 20 different sessions on 5 different tracks: new educators, experienced educators, parents, healthcare providers, and Spanish-language led.

EXHIBITORS

Attendees and exhibitors can make great connections and find new resources.



2024 Exhibitor Options

Standard Nonprofit Exhibitor with proof of 501c3—\$20

- Exhibitor table, tablecloth, and two chairs
- Organization name listed on website and conference booklet
- One conference registration with breakfast and lunch provided
- \$18 for additional lunches
- Electrical outlet will be an additional \$20 charge

Premium Nonprofit Exhibitor with proof of 501c3—\$100

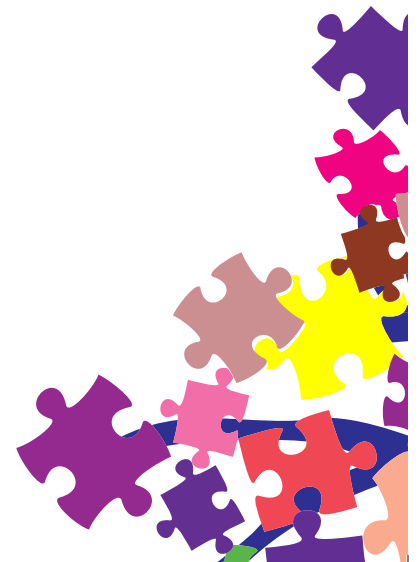
- Exhibitor table, tablecloth, and two chairs
- Listed on program and website as “Friends of NGAC”
- Two conference registrations with breakfast and lunches provided
- \$18 for additional lunches
- Business card size ad in booklet
- Electrical outlet included **upon request**

Standard General Exhibitor—\$125

- Exhibitor table, tablecloth, and two chairs
- Pick your location in advance
- Quarter page ad in conference booklet
- Listed on program and website as “Friends of NGAC”
- One conference registration with breakfast and lunch provided
- \$18 for additional lunches
- Electrical outlet will be an additional \$20 charge

Premium Exhibitor—\$175

- Exhibitor table, tablecloth, and two chairs
- Pick your location in advance
- Listed on program and website as “Friends of NGAC”
- Two conference registrations with breakfast and lunches provided
- \$18 for additional lunches
- Acknowledged on slideshows between presentations
- Half page ad in conference booklet
- Electrical outlet included **upon request**



9th Annual

NORTH GEORGIA



AUTISM CONFERENCE

Exhibitor Reservation Form

Company Name: _____

Contact Name: _____

Address: _____

Email: _____ Phone: _____

Website: _____

Exhibitor Contact: _____

I would like to sponsor at the level of (please check one):

- Nonprofit Exhibitor (includes one lunch) \$20 501c3 # _____
- Premium Nonprofit Exhibitor (includes two lunches) \$100 501c3 # _____
- General Exhibitor (includes one lunch) \$125
- Premium Exhibitor (includes two lunches) \$175
- I Need Electricity** **additional \$20** (unless included in your package upon request)

__ Designate number of lunches needed—in addition to those included in package (\$18 each)

Total Due \$ _____

List Names of Attendees

(this will appear on conference name badges):

PAYMENT INFORMATION

(please check one):

- Check enclosed** (*make all checks payable to Anna Shaw Children's Institute*)
- Invoice me** (payment due Friday, October 11th)
- Online payment** (hamiltonhealth.com/conferencepackages)

Please complete and submit form by mail, email, or fax to:

ATTN: Lindsey Coker

Anna Shaw Children's Institute

1201 Burleyson Rd., Dalton, GA 30720

Email: lcoker@hcs.org | Phone: 706.226.8913

Fax: 706.226.8905 (email Lindsey in advance and let her know you will be faxing your sponsorship form)