



**Kentucky League
for Nursing**

**Kentucky League for Nursing's Annual Nurse Educator Conference
May 21-22, 2024**

Holiday Inn Hurstbourne, Louisville KY

**Featured Speakers: Dr. Dodie Serafini, MSN, PhD, RN, CNE - NLN
Kelly Jenkins, MSN, RN, NE-BC-Ky. Board of Nursing
Jason Schwartz, MS - NCSBN
William Lanman, RN, MSN - Norton Healthcare**

Opportunities are available at the conference to have an exhibit table, sponsor a break or lunch, sponsor conference bags, and promote your business or services. This statewide summit of nursing educators will concentrate on best practices being implemented in programs of nursing.

The Kentucky League for Nursing's Annual Nurse Educator Conference will be an excellent opportunity for you to showcase your organization while demonstrating your support for nurse educators and students.

Questions? Contact Jeanie Carman, (859)314-5946 or kyleaguenursing@yahoo.com

Exhibit Fee

Exhibit tables are available for \$300.

Sponsorship

Continental Breakfast \$800
Break \$500
Luncheon \$800

(Sponsors will receive an exhibit table close to the conference room doors and special recognition)

Door Prizes

Donations large or small allow participants to try out your products and spread the word to colleagues.

Exhibit Set-Up

Vendors may set-up between 6:00 and 8:00 a.m., May 21, 2024.

Hotel Accommodations

A block of rooms has been reserved at the Holiday Inn Hurstbourne, 1325 Hurstbourne Parkway at I-64, Louisville KY for the conference attendees at a special rate of **\$125** per night. For reservations, call Holiday Inn at (502)426-2600. Be sure to indicate that you are attending the KLN Conference and use the code **Z1N** to receive a special room rate. There is no charge for vehicle parking.

Deadline for Requesting Space

April 19, 2024

Donations to our scholarship fund for Kentucky Nurse Educators is appreciated in any amount.

You will be assigned a vendor table when you arrive. Please do not move from your assigned vendor table.

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P.O. Box 1083
Richmond, KY 40476

Jeanie Carman, Executive Director
Phone: (859) 314.5946
E-mail: kyleaguenursing@yahoo.com

Company Name _____
Representative Name _____
Address _____

Phone _____ EMail _____

Method of Payment

- Bill Me
 Check

Registration Form

Sign up for:		Qty	Price
<input type="checkbox"/> Exhibit Table	\$300.00 ea.	_____	\$ _____
<input type="checkbox"/> Continental Breakfast	\$800.00	_____	\$ _____
<input type="checkbox"/> Break	\$500.00	_____	\$ _____
<input type="checkbox"/> Luncheon	\$800.00	_____	\$ _____
<input type="checkbox"/> Scholarship Donation			\$ _____
			Total: \$ _____