



CORRECTIONAL MANAGEMENT INSTITUTE OF TEXAS

GEORGE J. BETO CRIMINAL JUSTICE CENTER

SAM HOUSTON STATE UNIVERSITY

DOUG DRETKE
EXECUTIVE DIRECTOR

CHRISTIE DAVIDSON
ASSISTANT DIRECTOR

August 7, 2019

The Correctional Management Institute of Texas (CMIT) is pleased to announce the **2020 Women in Criminal Justice Conference**. The conference will bring together over 300 women representing the field of criminal justice throughout the state of Texas, to the Embassy Suites in San Marcos, March 23–26, 2020.

Your exhibit fee of \$250 will include two company representatives, a six-foot table and two chairs. Additional exhibit personnel from your company may register for an extra \$50 per person.

Please fill out and return the exhibitor contract. If you wish to register additional representatives, please attach an additional sheet of paper with their names and titles. Representatives can attend all conference functions.

EXHIBITS

Exhibits will be located in the Spring Lake Ballroom, on the first floor of the Embassy Suites. All refreshment breaks will be served there as well.

Exhibitors must set-up Monday, March 23th, between 3:00PM and 5:00PM. Exhibits will open Tuesday, March 24th at 7:30AM and close at 3:00PM. This will allow participants to visit during refreshment breaks. Booths will reopen on Wednesday, March 25th at 7:30AM and close at 3:00PM.

You may select your booth(s) using the exhibitor floor plan enclosed. Booths will be assigned on a first come, first serve basis, as contracts and payments are received. Please fax or email your completed exhibitor contract to Lynne Mosley, Correctional Management Institute of Texas, Sam Houston State University, Box 2296, Huntsville, TX 77341-2296. Send your exhibit fee to our headquarters as soon as possible in order for the Institute to ensure full utilization of exhibit space.

Only a limited number of spaces will be available, so do not delay in making your reservations for a booth and a hotel room. If you need special accommodations for your booth, please contact us.

SPONSORSHIP

As another means of conveying your message to attendees, please consider sponsorship of a conference refreshment break or speaker. These events are well attended and sponsors generate a great deal of goodwill through the provision of such amenities.

Companies that want to receive special recognition for their level of participation in the conference should fill out the Sponsorship Form and return it as soon as possible. Sponsors of conference events will be recognized with signage and in the conference workbook.

SHIPPING INFORMATION

Shipments should be delivered to the Hotel no more than 48 hours prior to the program date commencement. After the conference, any packages left past (5) days will be discarded. Handling charges are assessed for incoming and outgoing packages by weight. The Embassy Suites reserves the right to refuse receipt of any package.

Address Packages:

Embassy Suites
(Guest Name/WICJ Conference)
1001 E. McCarty Lane
San Marcos, Texas 78666

Each booth is \$250.00. Please complete the Exhibitor Contract, Sponsorship Form, if applicable, and Hotel Exhibitor Forms to indicate first, second, and third choice for exhibit location and return via email, US Postal Service, or fax to 936-294-1671.

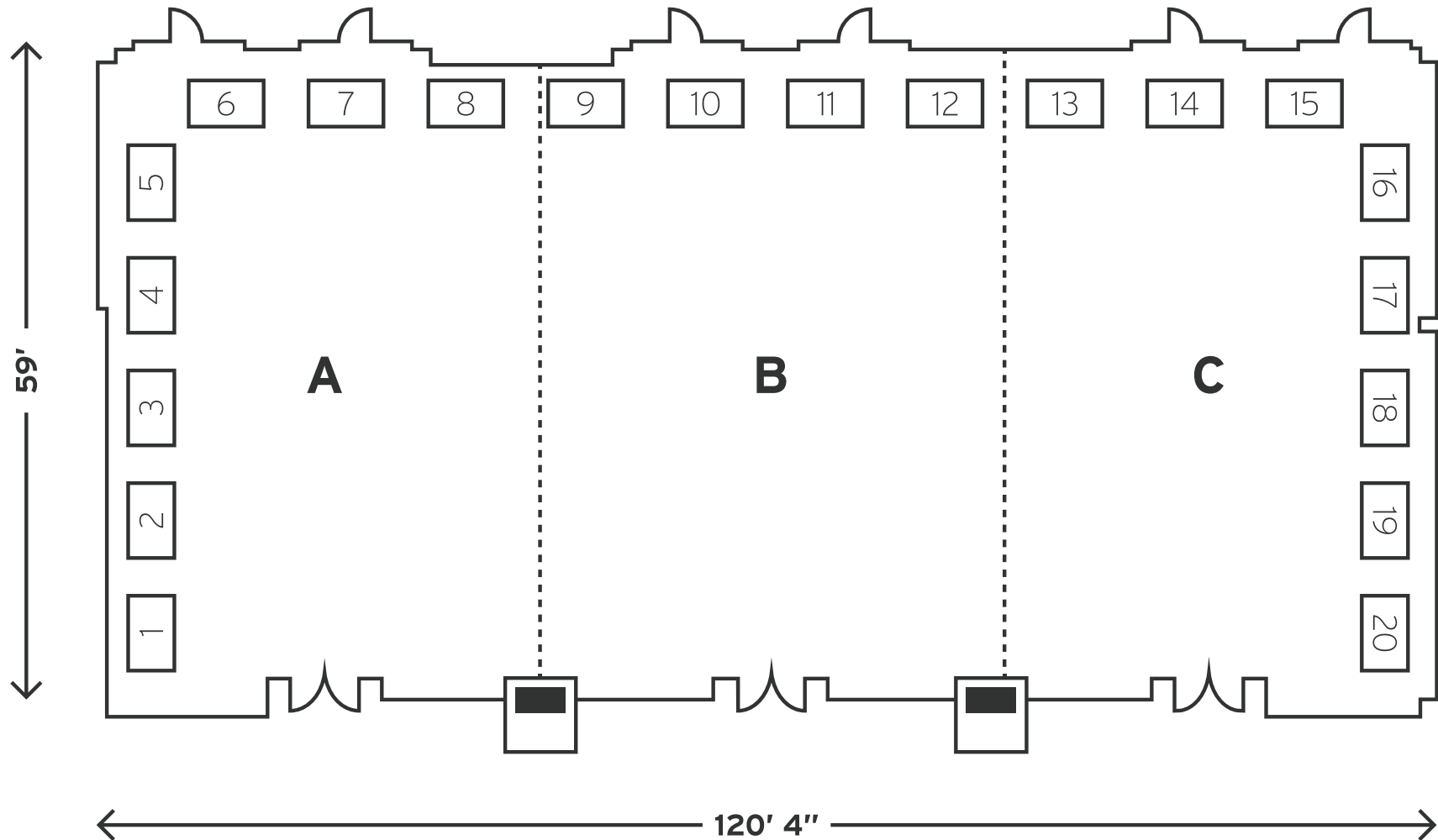
You can make your room reservation by calling Embassy Suites at 512-392-6450. We are planning a great conference and hope you will be a part of it. Please feel free to contact us should you have questions or require assistance. See you in San Marcos!

Sincerely,

A handwritten signature in black ink that reads "Andrea Mosley". The signature is fluid and cursive, with the first name "Andrea" and last name "Mosley" clearly legible.

Lynne Mosley, Ed.M.
Project Coordinator
Phone: 936-294-1705
Email: lynne.mosley@shsu.edu

Embassy Suites by Hilton San Marcos Hotel Conference Center & Spa



Convention Center - Spring Lake Ballroom - Exhibit Hall



2020 Women in Criminal Justice Exhibitor Contract

EMBASSY SUITES / SAN MARCOS, TX / MARCH 23-26, 2020

Instructions: Complete all information blanks. Sign, date, and email to lynne.mosley@shsu.edu or fax 936-294-1705.

Signed contract and fee must be received by February 24, 2020, in order to reserve exhibit space. Your payment must be received prior to the start of the conference, or your booth space will be released. If you need to discuss payment options, booth locations, special sponsorships, or special needs such as large equipment, contact Lynne Mosley at 936-294-1639.

Company Name to be listed on signage: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

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 Embassy Suites, 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 # _____

Exhibitor desires a total of _____ booth(s), at \$250 for each booth, for a total of \$_____ payable upon return of signed contract mailed to CMIT.

3. Area of expertise: _____

Do you need electricity from Embassy Suites?

Yes ☐ No ☐

If so, please complete the enclosed Vendor Charge form.

4. Names of firm representative(s) attending booth. (Each booth entitles you to 2 full conference registrations.)

Please print or type name(s) and title(s):

Name 1: _____ Title: _____

Name 2: _____ Title: _____

5. Exhibitor will accept booth space assignment as determined by CMIT.

6. Exhibitor may, if he/she desires, cancel the agreement and receive a full refund, minus a service charge of \$100, if written request is received by February 24, 2020.

7. CMIT reserves the right to refuse any exhibit or Exhibitor and further reserves the right to shut down any exhibit or Exhibitor for breach of this agreement, or for cause.

8. Are you willing to sponsor/co-sponsor an event at the conference?

Yes ☐ No ☐

If so, please fill out the attached form indicating the event you wish to sponsor and your dollar commitment level.

Please copy form and return original along with payment made payable to:

Attn: Lynne Mosley, Women in CJ Conference
Correctional Management Institute of Texas
Sam Houston State University
Box 2296
Huntsville, TX 77341-2296

Pay online at www.cmitonline.org/WICJ

Questions? Contact Lynne Mosley at lynne.mosley@shsu.edu or 936-294-1705





2020 Women in Criminal Justice Sponsorships

EMBASSY SUITES / SAN MARCOS, TX / MARCH 23-26, 2020

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 participants' 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. If you choose to be a co-sponsor, please indicate the amount you will provide.

DATE	EVENT	FULL SPONSORSHIP	CO-SPONSORSHIP
Mon 3/23	Afternoon Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
Tues 3/24	Morning Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
Tues 3/24	Afternoon Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
Weds 3/25	Morning Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
Weds 3/25	Afternoon Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
Thurs 3/26	Morning Refreshment Break	_____ (\$1,000)	_____ (\$ _____) min \$200
—	Speaker	_____ (\$1,000)	_____ (\$ _____) min \$200

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Title: _____ Signature: _____

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

Exhibitor Receiving & Storage Services

COMPANY INFORMATION	EXHIBIT ROOM INFORMATION
Exhibitor Company Name:	Program: _____
On-Site Exhibitor Name:	Function Room: _____ Booth #: _____
Billing Address:	Set Up Date: _____ Set Up Time: _____
City, State, Zip:	End Date: _____ End Time: _____
Telephone Number:	<p style="text-align: center;">Need to Know</p> <ul style="list-style-type: none"> Vendors are not allowed to pick up packages on their own. All Packages are allowed free storage 48 Hrs. upon arrival and departure. Use the Exhibitor Package Label on all packages being sent to the Hotel. Full payment is due 10 business days prior to group event. Purchase orders are not accepted. Must Schedule pick up or will be subject to Hotel fees. Exhibitor Responsible for scheduling Shipping directly with outside vendor or may use Hotel Shipping Services. Any Packages left on site after 48hrs. will incur applicable storage fees, before shipping, Hotel will collect payment for any accrued fees.
Email Address:	

Package Storage Fees

Type	Cost	QTY	Days	Total
1-10 pounds	\$5 per package			
11-20 pounds	\$8 per package			
21-50 pounds	\$12 per package			
51-100 pounds	\$15 per package			
100+ pounds	\$20 per package			
Pallets				
Inbound Storage	\$55 per pallet *First Day			
Outbound Storage	\$45 per pallet *First Day			
Extended Storage	\$75 per pallet *Second day onward			
Drayage Fees				
Under 10 lbs.	\$5 per package		N/A	
Between 10-60 lbs.	\$15 per package		N/A	
Over 60 lbs.	\$35 per package		N/A	

Payment <small>(Credit card questions? Call 512-805-5309)</small>	Subtotal
<input type="radio"/> Credit Card <input type="radio"/> Check	25% Service Charge
Card Holders Name:	8.25% Sales Tax
Account Number:	Subtotal + 25% + 8.25% = Grand Total
Expiration Date:	GRAND TOTAL
Card Type:	
Verification Code:	
Signature:	

Exhibitor Outbound Shipping Form

Company Information	Exhibitor Room Information	
Exhibitor Company Name:	Program:	
On-Sight Exhibitor Name:	Ship To:	
Billing Address:	<h2 style="text-align: center;">Need to Know</h2> <ul style="list-style-type: none"> • Contact Shipping-Receiving Department for shipping quote • This Form must be completed, signed and payment received before shipment is scheduled. • All shipments require signature upon delivery to destination. 	
E-Mail Address:		
Telephone Number:		

Shipping Quote.	Description of outbound package	Total

Pallets

Description of outbound package	Total

Payment <i>(Credit card questions? Call 512-805-5309)</i>		Scheduling Fee	14.00
<input type="radio"/> Credit Card <input type="radio"/> Check		Subtotal	
Card Holders Name:		25% Service Charge	
Account Number:		8.25% Sales Tax	
Expiration Date:		Subtotal + 25% + 8.25% = Grand Total	
Card Type:		GRAND TOTAL	
Verification Code:			
Signature:			



EMBASSY SUITES®

EXHIBITOR PACKAGE

To: Embassy Suites – San Marcos
1001 E. McCarty Lane
San Marcos, TX 78666

Group: _____

On-Site Exhibitor Name: _____

Company: _____

Booth #: _____

Date of Arrival: _____

Box _____ of _____ PCS



EMBASSY SUITES®

EXHIBITOR PACKAGE

To: Embassy Suites – San Marcos
1001 E. McCarty Lane
San Marcos, TX 78666

Group: _____

On-Site Exhibitor Name: _____

Company: _____

Booth #: _____

Date of Arrival: _____

Box _____ of _____ PCS

Exhibitor Services Order Form

Company Information: <hr/> Exhibitor Company Name <hr/> On-site Contact Name <hr/> Billing Address <hr/> City, State, Zip <hr/> Telephone Number <hr/> Fax Number <hr/> Email Address	Exhibitor Information <i>(Please Complete the requested)</i> Event _____ Booth # _____ Set Up Date _____ Payment <i>(Credit card questions? Call 512-805-5309)</i> <input type="radio"/> Credit Card <input type="radio"/> Check <input type="radio"/> Master Account <input type="radio"/> Guest Room # Card Holder's Name: _____ Account Number: _____ Expiration Date: _____ Card Type: _____ Verification Code: _____ Signature: _____ Payment Terms Conditions <ul style="list-style-type: none"> Payment Total is due 10 business days prior to group event. Any additions or variances will be billed within 24 hours after close of the event. Purchase orders are not accepted. Cancellations less than 24 hours prior to exhibit load-in is charged 100% of one day's rate. Must Fax The Forms To 512-805-5310 Exhibitor agrees pay for damages or equipment lost while in exhibitor's care or control. A 25% Service Charge will be applied to all AV services rendered for each day's use. Discount Price available 14 days prior to event, Standard Price available 13 to 4 days prior to event, Floor Price available 3 days prior to event and on-site.
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ELECTRICITY	Discount Price	Standard Price	Floor Price	Quantity x	# Days x	= Amount
Basic Power*	\$20	\$30	\$45			
20 AMP Power**	\$55	\$75	\$95			

HIGH SPEED INTERNET

Wi-Fi Connections (2 Users)	\$10	\$15	\$20			
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Audio Visual

43" Monitor	\$100	\$125	\$200			
Laptop Computer	\$225	\$275	\$350			
HDMI Cable	\$15	\$25	\$35			
25' VGA Cable	\$15	\$25	\$35			
6' MIL Protective Plastic 8x10/10x10 Exhibit booth	\$45	\$65	\$75			
Flip Chart	\$25	\$45	\$65			
Up lights	\$30	\$60	\$80			
Self-Powered Speaker	\$60	\$80	\$100			
4 Channel Mixer	\$50	\$50	\$70			
Wired Microphone	\$75	\$95	\$125			
Wireless Microphone	\$65	\$85	\$115			
Computer Sound Package	\$180	\$225	\$275			
Computer Speakers	\$15	\$25	\$55			

Accessories

Labor- Half Hour Min.	\$45	\$55	\$60			
Cocktail Table or AV Cart	\$25	\$35	\$55			
6' or 8' Table	\$70	\$75	\$85			
Ice per 10 lbs.	\$10	\$15	\$20			
Hot Water per gallon	\$10	\$15	\$20			
Vehicle Load in	\$150-\$250	\$250-\$300	\$350			

*Includes electricity, power cord & labor

**Includes dedicated 20 AMP circuit, power cord & labor

Grand Total = Subtotal + 25% + 8.25%

Subtotal	
Service Charge	25%
Sales Tax	8.25%
Grand Total	