



5510 Cherokee Ave, Suite 300, Box 1294
Alexandria, VA 22312
1-888-711-3675
info@naehd.org
www.naehd.org

Venue: Sheraton Pentagon City Hotel

Address: 900 S Orme Street Arlington, VA 22202

Category	Early Bird Rate- Before 9/18/26	Regular Rate- After 9/18/26	Included Personnel
For Profit Booth	\$1,500	\$1,700	2 Included
Non-Profit Booth	\$750	\$850	1 Included
Additional Personnel	\$200	\$200	N/A

Exhibiting Company Information

Company Name

Company Type	For-Profit	Non-Profit
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Website

Company Address

Street Address

Address Line 2

City _____ State _____ Zip _____

Primary Contact

First Name _____ Last _____

Title	Email	Phone
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Included Personnel

First Name	Last	Email
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First Name

Last

Email

Special Requests

Marketing & Branding

Company Description

Provide a 50–75 word description of your organization, products, or services. Used for: Mobile app, Website exhibitor listing, and the printed program.

Company Social Media Handles

Permission to Feature Your Organization

I authorize NAEHD to feature our organization in Summit marketing and exhibitor communications.

Company Logo

Please email an Upload a high-resolution PNG or JPG of your logo to info@naehd.org upon submission of this form.

Exhibitor Agreement & Terms

Event Details

This agreement governs participation in the Exhibit Hall at the 2026 National Health Disparities Summit, held December 3–4, 2026 at the Sheraton Pentagon City, Arlington, VA.

Booth Package

Each exhibitor booth includes:

- Standard exhibit space
- One 6' draped table
- 1–2 chairs
- Listed personnel based on exhibitor category
- Recognition in Summit materials

Payment Terms

- Payment is required to confirm exhibit space



- Applications submitted without payment will not be assigned space.
- All fees must be paid in full prior to the event.

Booth Assignment

- Assignments are first-come, first-served upon receipt of full payment.
- NAEHD may adjust booth placement as needed.

Cancellation Policy

- Must be submitted in writing.
- \$200 administrative fee applies.
- Refunds available until November 1, 2026.
- No refunds after November 1, 2026.

Exhibitor Conduct

- Professional behavior required at all times.
- NAEHD may remove exhibitors who disrupt the event or conflict with the Summit's mission.

Use of Space

- Activities must remain within booth space.
- No subletting.
- No blocking aisles.
- Distribution limited to booth.
- Food/beverage distribution is not allowed.

Damage Responsibility

Exhibitors are responsible for any damage caused to venue property.

Liability & Insurance

- Exhibitors must insure their own property.
- NAEHD is not liable for theft or damage.

Force Majeure

If the Summit is cancelled due to circumstances beyond NAEHD's control, exhibit fees will be refunded.

Compliance

Exhibitors must comply with venue rules and safety requirements

I agree to the Exhibitor Terms & Conditions listed above



National Alliance on
Ending Health Disparities
Research | Education | Advocacy

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Name

Signature

Date

Payment Information:

For security and PCI compliance, we do not collect credit card information on this form. A secure electronic payment link will be sent upon receipt of your application.

Booth space is confirmed only upon receipt of full payment.

Electronic payment: A secure link will be sent upon receipt of your application.

Check payment: please select this option and mail the check to the address below.

Mailing Address:

National Alliance on Ending Health Disparities
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Alexandria, Virginia 22312