

**Add A Little Adventure To Your Meetings**  
**13<sup>th</sup> Annual Gateway to Bucks County**  
**Thursday, May 13, 2010**  
**6PM – 8PM**  
**Bucks County Visitor Center**  
**3207 Street Road Bensalem, PA 19020**

**Marketing Partner Information Packet**

**What is Gateway to Bucks County?**

Gateway to Bucks County is Visit Bucks County's annual partnership tasting and tradeshow. Qualified meeting and event planners are invited to the Visitor Center to taste, view and experience what Bucks County has to offer. Partners with meeting and event friendly facilities and services are invited to take advantage of an opportunity to showcase themselves.

**Who Will Be Attending?**

- The estimated attendance is 75-100 corporate, association, independent, wedding, meeting, event planners and group tour operators.
- Areas reached: New York, New Jersey, Delaware, Washington DC, Virginia and Pennsylvania

**As a Partner, Why Should I Participate?**

- An ideal opportunity to enhance visibility and recognition of your meeting/ event friendly facility, attraction and/or service.
- This year's event is invitation only and limited to two pre-qualified staff people per organization.
- All attendees will be required to pre-register for the event.
- Only qualified planners who organize meetings and events that Bucks County can accommodate will be invited to attend.
- All participating partners will receive a comprehensive list of all Gateway attendees.

**Cost to Exhibit:**

All opportunities to participate will be granted on a first-come, first-serve basis.

Food Exhibitor	\$240
Non-Food Exhibitor	\$275
Wine/Beverage Exhibitor	\$200
Additional Exhibitor Staff Badge	\$50

(All exhibit spaces will be granted on a first-come, first-serve basis. Contracts and payment must be received in order for space to be reserved. Space is limited to 35 exhibit spaces.)

**Exhibitor Benefits:**

- One 6 ft. table skirted for display
- Identification Sign
- Two Exhibitor Staff Badges
- Brochures Included in Promotional Bags
- Listing on program distributed to all planners
- Listing on Gateway to Bucks County webpage
- Pre-list of all pre-registered planners
- Post-list of all Gateway planners

**Partner with Other Partners:** In an effort to showcase as many marketing partners as possible, we are encouraging all partners to share table space and split the cost to exhibit with another partner. For instance, we encourage catering partners to share a table with one of your venues. Not only will this allow us to showcase more of Bucks County, it will also make more sense for planners to see catering matched with a meeting venue.

**Gateway Schedule:**

Exhibitor Load In:	12:00 PM – 4:00 PM
All Food/Beverage Exhibitors set for Dept. of Health	4:00 PM
Doors Open to Theater	4:30 PM
Panel Education Session in Theater	5:00 PM – 6:00 PM
Main Entrance Gateway Doors Open to Planners	5:30 PM
Doors Close	8:00 PM
Breakdown	8:15 PM

**Duration of Gateway Event:**

2 hours (not including 1 hour education session in theater)

**Dress Code:**

Business Attire

**Theme:**

Add A Little Adventure To Your Meetings – we encourage all exhibitors to incorporate an adventurous, interactive element into their exhibit spaces.

**Load In:**

- Exhibitor Load In will begin at 12:00 PM on Thursday, May 13<sup>th</sup>.
- For Load In, please proceed to the loading dock entrance of the Visitor Center (near the dumpster), unload your vehicle and park where indicated.
- Set-up cannot occur after 4:00 PM
- Exhibitors who fail to unload by 4:00 PM will not be permitted to exhibit with no refund
- Each exhibitor will have one parking space in the Visitor Center lot.

### **Breakdown:**

- Breakdown cannot occur before 8:15 PM

### **Food and/or Beverage Exhibitors:**

All exhibitors bringing food or beverage items will be inspected by the Bucks County Department of Health prior to doors opening at the event. Only those exhibitors who have undergone previous off-premise catering inspection by the Dept. Of Health and/or currently have an off-premise catering license issued by the Dept. of Health are encouraged to display food or beverage items.

### **Food/Beverage Exhibitor Rules & Regulations:**

- All Food/Beverage Exhibitors Must Provide 300 samples of product
- All Food/Beverage items must be pre-approved by the BCCVB to insure variety.
- All Food/Beverage exhibitors must provide cooler and/or refrigeration, heating devices, heavy duty extension cords, chaffing dishes, heating utensils, carts to take food and décor from load-in to your area.
- All Food/Beverage exhibitors are encouraged to distribute items that only need to be heated/refrigerated, not prepared or cooked on-premise. The Dept. of Health is very strict with their regulations and will require exhibitors to breakdown their display booths if food does not meet temperature and other standards.
- All Food/Beverage exhibitors are required to have an off-premise catering license. **Please complete the attached application for license and return it with your paperwork.**
- If you already have an off-premise catering license, you must bring it to present to the Department of Health the day of the event and send a photocopy to BCCVB with your exhibitor contract.
- **The BCCVB will provide ice, wine glasses, plates, napkins, forks, spoons, knives, gloves, handi-wipes and electricity at no extra charge.**

### **Electrical:**

- **All electrical needs must be given to Heather at the Bucks County Visitors Center (215) 639-0300 ext. 227 by Monday, May 3, 2010.**
- No electrical requests can be made the day of the show.
- No Large Propane Tanks.

### **Promotional Brochures:**

Please deliver your brochures (200 pieces) to the Bucks County Conference & Visitors Bureau. I/O Gateway 2010 the week of **April 19, 2010**. Brochures will not be accepted for inclusion in Promotional Bags after **Friday, April 23, 2010**.

### **Insurance Certificate:**

- A copy of your facilities liability insurance certificate must be submitted to the BCCVB with your contract.

**Additional Advertising Opportunity:**

All exhibitors will receive a complimentary listing in the program book. However, you are invited to highlight your facility by placing a half (\$50) or full page (\$100) black/white advertisement in the program book. If you are interested advertising, please return the Advertising Contract along with your Exhibitor Contract. All ad files must be emailed to [HWalter@VisitBucksCounty.com](mailto:HWalter@VisitBucksCounty.com) no later than **Monday, April 19, 2010**.

**Return contract(s), off-premise catering license, insurance certificate and payment to:**

Heather Walter  
Visit Bucks County  
3207 Street Road  
Bensalem PA 19020  
Email: [HWalter@VisitBucksCounty.com](mailto:HWalter@VisitBucksCounty.com)  
Fax: 215-642-3277  
Phone: (215) 639-0300 ext. 227

**GATEWAY PAPERWORK MUST BE RETURNED BY FRIDAY,  
MARCH 19<sup>th</sup>.**

**\*\*Please return this contract with payment to the BCCVB, Attn: Heather Walter, Visit Bucks County (Gateway) 3207 Street Road, Bensalem, PA 19020**

## **13<sup>th</sup> Annual Gateway to Bucks County Exhibitor Contract**

### **Part I. Exhibitor Information**

**Company Name to Be Listed:** \_\_\_\_\_

**Names of company representatives for exhibitor staff badges:**

1. \_\_\_\_\_ 2. \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
\_\_\_\_\_ **Fax :** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_ **Website:** \_\_\_\_\_

### **Part. II Exhibitor Costs**

			<b>Amount Due</b>
<input type="checkbox"/> Food Exhibitor	\$240	=	_____
<input type="checkbox"/> Non-Food Exhibitor	\$275	=	_____
<input type="checkbox"/> Wine/Beverage Exhibitor	\$200	=	_____
<input type="checkbox"/> Additional Exhibitor Staff Badge	__ x \$50	=	_____
	<b>TOTAL DUE</b>	=	_____

**I will be distributing the following food/beverage items:**

\_\_\_\_\_

### **Part III. Payment Information**

Check Enclosed (payable to the Bucks County CVB I/O Gateway 2010)

Charge My  Visa  MasterCard  AmEx

**Credit Card #:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

**Name on Card (Print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

### **Part IV. Agreement**

Bucks County CVB reserves the right to assign space as equitably as possible. Space will be granted on a first-come first-serve basis. Cancellation Policy: All cancellations and/or request for refunds must be made in writing to Bucks County CVB. A 50% refund will be granted upon written notice received at least 30 days prior to the event. No refund will be given for any cancellations received less than 30 days before the event and all outstanding balances are due in full. By signature below, the individual signing this contract represents and warrants that he/she is duly authorized to execute this binding contract and agrees to abide by all exhibit regulations, instructions and conditions.

**Authorized by: (Print Name & Title)** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# 13<sup>th</sup> Annual Gateway to Bucks County Program Advertising Contract

## Part I. Advertiser's Information

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Website: \_\_\_\_\_  
Fax : \_\_\_\_\_

## Part. II Program Ad Cost

		Amount
Due		
<input type="checkbox"/> Half Page Black & White (5"x 4")	\$50 =	_____
<input type="checkbox"/> Full Page Black & White (5"x 8")	\$100 =	_____
	<b>TOTAL DUE =</b>	_____

## Part III. Format & Resolution

Please email all **high resolution (300 dpi)** advertisements in **.jpeg format** to Heather Walter at [HWalter@VisitBucksCounty.com](mailto:HWalter@VisitBucksCounty.com) no later than **Monday, April 19, 2010** for inclusion in the Gateway program.

## Part IV. Payment Information

Check Enclosed (payable to the Bucks County CVB I/O Gateway 2010)  
Charge My  Visa  MasterCard  AmEx  
Credit Card #: \_\_\_\_\_  
Security Code: \_\_\_\_\_ Expiration: \_\_\_\_\_  
Name on Card (Print): \_\_\_\_\_  
Signature: \_\_\_\_\_

## Part V. Agreement

Bucks County CVB reserves the right to assign space as equitably as possible. All outstanding balances are due in full. By signature below, the individual signing this contract represents and warrants that he/she is duly authorized to execute this binding contract and agrees to abide by all exhibit regulations, instructions and conditions.

Authorized by: (Print Name & Title) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_