



National Association of Pediatric Nurse PractitionersSM

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National Association of Pediatric Nurse Practitioners 2027 Industry-Sponsored Non-Continuing Education (Non-CE) Exhibit Hall Product Showcase Application

Note: Meeting space assignment is on a first come basis. No one is guaranteed space until payment is received.

Supporting/Exhibiting Company:

Organizer (Contracting Company if
different):

Contact

Title:

Person:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Topic of Exhibit Hall Product Showcase:

☐ **\$13,500: Exhibit Hall Product Showcase (30 minutes) – Please select first choice for date and time slot:**

____ Monday (3/22/27): 8:45-9:15 a.m.

____ Tuesday (3/23/27): 8:30-9 a.m.

____ Monday (3/22/27): 9:30-10 a.m.

____ Tuesday (3/23/27): 9:15-9:45 a.m.

____ Monday (3/22/27): 12:30-1 p.m.

____ Tuesday (3/23/27): 10-10:30 a.m.

____ Monday (3/22/27): 1:15-1:45 p.m.

Deadline for application is February 8, 2027

SELECT PAYMENT TYPE - Submit payment with application

☐ Visa ☐ MasterCard ☐ American Express

Card #: _____ 3 or 4 digit Security Code: _____ Exp. Date: _____

Total Amount: _____

Cardholder: _____ Authorized Signature: _____

☐ Check: Make Checks payable to: NAPNAP Tax ID# 23-7403934

Send completed application and payment to: Attn: Conference Dept. 125 Maiden Lane, Suite 15C, New York, NY 10038 or Email: hkeesing@napnap.org