CALIFORNIA AMBULANCE ASSOCIATION

ANNUAL
Stars of Life
CELEBRATION
AND LEGISLATIVE SUMMIT

APRIL 3 - 4, 2017
EMBASSY SUITES HOTEL – SACRAMENTO, CA

HEALTH CARE’S ESSENTIAL FIRST RESPONDERS
The CAA’s Annual Stars of Life Celebration is the most exciting state event that recognizes and honors the dedicated professionals in the ambulance services industry. The program also features meetings with Members of the Legislature at the State Capitol where your ambulance company will deliver important information to your Assembly Members and Senators on the value of quality ambulance services as a key component of an effective and efficient health care delivery system. Educating our legislators is critical for our industry, as various reforms are quickly changing the structure of health care in California. By sponsoring one or more Stars of Life and joining other CAA members at the event, we collectively gain a tremendous platform to educate our elected officials about our many entrepreneurial solutions to public policy challenges. Your participation also ensures wonderful memories for your employees and valuable local exposure and recognition for your ambulance operation.

LEGISLATIVE & REGULATORY BRIEFING
During committee meetings, the CAA will also address the legislative and regulatory priorities the CAA is monitoring:

- CAA Legislative Strategy for 2017
- Proposing bills that ease ambulance regulatory burden and cost.
- Community Paramedic Legislation
- Toll Roads/Bridges Exemption
- Impact of new Rest Period requirements
- Options to improve Medi-Cal reimbursement for ambulance services
- CAA grassroots messaging regarding impact of low reimbursement rates
- Transfer of care delays at hospital emergency departments

JOIN THE CAA AT THE ANNUAL LEGISLATIVE SUMMIT
Even if your organization does not sponsor an employee to receive the Star of Life award, we urge you to participate in statewide efforts to advocate for ambulance issues.

- Never met with your legislator? Join the CAA for custom designed tools and strategies on how to meet with your elected official.
- An experienced advocate? Join the CAA to lend your expertise in generating legislative support on key ambulance issues.
- Volunteer or government agency provider? Join the CAA in creating a unified voice as the issues facing California’s provider community impact all providers equally.
- Not a member? Join the CAA to maximize our collective effort to protect your business.
Each company is responsible for their own Star of Life selection process. It is strongly recommended that a company representative or Host accompany Stars to all events on Monday, April 3rd. Your Star of Life does not have to be present to be recognized in the CAA Stars of Life Yearbook. Each Stars of Life Yearbook honoree will receive the Stars of Life Medal, a legislative certificate, and will be recognized in the Stars of Life Yearbook. Late sign-ups are discouraged as many program details require lead time including, scheduling legislative appointments, printing the Stars of Life Program and arranging for legislative certificates. Please don’t be disappointed, register your Star by the March 17, 2017 deadline.

Start Your Stars Selection Process Now!

Stars of Life – One of the Most Exciting Association Events of the Year

+ Medal presentation ceremony and orientation.
+ Individual meetings with your members of the Assembly and/or Senate.
+ Legislative Certificate of Recognition and pin for each Stars of Life honoree.
+ Networking Reception and Awards Dinner.
+ Group photos at the State Capitol.
+ Numerous opportunities for local and state recognition.

Objectives of the Stars of Life Celebration

✔ REWARD and congratulate outstanding ambulance service employees;
✔ EDUCATE Members of the Administration, Legislature and their staff regarding ambulance service issues and the key role of ambulance professionals in the local community;
✔ PROJECT the image of the California Ambulance Association as the leading state organization on ambulance industry issues;
✔ TEACH the next generation of ambulance service managers how to participate in the legislative process;
✔ GENERATE positive local media stories regarding ambulance services and Stars of Life recipients; and
✔ ENHANCE the profile of National EMS Week across the United States and the state of California.

Suggested Star of Life Recipients

Any employee from your organization who epitomizes the spirit and commitment of a quality ambulance service: EMTs, paramedics, dispatchers, customer service representatives or other operations personnel (living or deceased) are appropriate candidates as Stars of Life. These candidates may be selected because they received or were honored for:

★ Employee of the year.
★ On-duty or off-duty service above and beyond the call of duty such as special or unique rescues.
★ Setting of significant records.
★ Significant community contributions such as volunteer work.
★ Significant community distinction or honors related to ambulance, public safety, public health or health care services.
★ Consistent service record which exemplifies your ambulance operation’s mission.
★ Local leadership in developing community partnerships which enhance homeland security.
HOTEL INFORMATION

Embassy Suites Sacramento
100 Capitol Mall
Sacramento, CA  95814
916.326.5000
www.embassysuites.hilton.com

Hotel Rate
Guest Room Rate: 2 double beds - $179; 1 king bed - $189

Hotel Reservations
For reservations, please call 916.326.5000 or 1.800.EMBASSY
Hotel cut-off date: March 11, 2017

Parking/Directions
From Interstate 5 exit at J Street heading east. Turn right on 3rd Street and turn right onto Capitol Mall. Hotel is on the left. Self-parking is available off-site and valet parking is available on-site.

Please complete the various registration forms included with this brochure.
**REGISTRATION FORM**

April 3-4, 2017 • Embassy Suites Hotel, Sacramento, CA

*Early Registration deadline is Friday, March 10, 2017.*

Host and Star registration fee includes committee meetings, opening session, materials, refreshments, reception, and dinner (registration fee does not include travel expenses, hotel, or meals other than those specified). Attendance at committee meetings requires registration and payment of registration fees. There is an additional $25 per person charge for registration after the deadline and for on-site registration. Late Star registrations are discouraged. Star registrations received after the deadline may not be included in the printed program and may not receive an individual legislative certificate. **Star of Life** Full Registration includes medal, legislative certificate, name entered in the prize drawing and photo/bio published in the yearbook. Full registration includes the breakfast, reception and dinner on Monday, April 3rd. **Star of Life** Yearbook Honoree includes medal, legislative certificate, and photo/bio published in the yearbook.

Company __________________________________________
Address _______________________________________________________________________________________
City ____________________________ State ___________ Zip __________
Phone __________________________ Fax __________________________

**ATTENDEES —**

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<th>Star</th>
<th>Host</th>
<th>Guest</th>
<th>Name</th>
<th>Title / Relationship</th>
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**EARLY REGISTRATION**

**CAA MEMBERS —**

This event is for CAA members only. Non-members may attend if a membership application is submitted with membership dues.

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<th># People</th>
<th>Total</th>
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<tr>
<td>Star of Life Full Registration (For Stars)</td>
<td>@ $130 = $</td>
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<tr>
<td>Star of Life Yearbook Honoree (For Stars Not Attending)</td>
<td>@ $ 65 = $</td>
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<tr>
<td>Regular/Host Full Registration (For CAA Members)</td>
<td>@ $155 = $</td>
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<tr>
<td>Breakfast Only (Family/Guest)</td>
<td>@ $ 40 = $</td>
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<td>Dinner Only (Family/Guest)</td>
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**REGULAR REGISTRATION**

For registration forms received after March 10, 2017, add:

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<th># People</th>
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**PAYMENT —**

☐ Check payable to California Ambulance Association ☐ Mastercard  ☐ Visa  ☐ American Express

Card Number ___________________________ Exp Date ___________ 3-4 Digit CID ___________

Name on Card ________________________________________________________________

Address (if different from above) ____________________________________________________________________________

Signature ________________________________________________________________________________________________

*Early registration deadline is Friday, March 10, 2017. Cancellations must be received in writing by March 10, 2017. No refunds shall be given after March 10, 2017. Registration may be transferred to another individual within the same company.*

Please complete and return to:

**CALIFORNIA AMBULANCE ASSOCIATION**

2520 Venture Oaks Way, Suite 150, Sacramento, CA 95833
877.276.1410 (toll free) • 916.924.7323 (fax) • www.the-caa.org
**STARS OF LIFE BIO FORM**

Please Complete One Form per Star

<table>
<thead>
<tr>
<th>Star Name</th>
<th>Company</th>
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<th>Title / Position</th>
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<tr>
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E-mail

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<th>Shirt Size</th>
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**2017 STARS OF LIFE PROGRAM**

Each Star will be featured in the 2017 *Stars of Life* Program – a yearbook which will contain each Star’s name, photo and short biography. In order to be featured in the program, please provide:

**BIOGRAPHY** – Submit biography electronically to koreno@the-caa.org with a narrative containing all of the following (150 words or less):

- **REASON FOR SELECTION** – Describe reason for selection such as lifesaving rescues, service beyond call-of-duty, setting of records, community service, special honors, consistent service record or local leadership in community partnerships.

- **WORK EXPERIENCE** – Describe title, positions held and length of service.

- **DISTINGUISHING PERSONAL TRAIT** – Describe the qualities that epitomizes the spirit and commitment of quality ambulance service.

- **NOTABLE PERSONAL INTEREST** – Describe individual’s special hobbies, interests and activities.

**COLOR PHOTO** – Submit a color photo, head shot only. If submitting electronically, JPG format preferred. If submitting hard copy via mail, handle photos carefully, do not staple, bend or paper clip, write name on the back of photo.

**RECOMMENDED ATTIRE FOR STARS**

Please wear a “dress uniform” to all official *Stars of Life* events during the day on Monday, April 3rd. Business attire can be worn to the reception and awards dinner on Monday evening. As a representative of the entire EMS industry, Stars’ attire should be indicative of a health care professional.

**RECOGNITION IN YOUR LOCAL COMMUNITY**

A local story with a state-wide angle will play favorably with reporters in your local community. You are encouraged to send a press release to your local newspapers, radio and TV stations prior to the event informing them that this “special story” is on its way. Reporters can then schedule interview time or broadcast time for your story and perhaps visit your company to film additional footage and/or interviews.

**PARTICIPANT CHECK LIST**

- Hotel reservation deadline: March 11, 2017
- Biography by March 17, 2017
- Legislative Appointment Form by March 17, 2017
- Registration Form by March 17, 2017
- Photo by March 17, 2017

Please complete by Friday, March 17, 2017 and return to:

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877.276.1410 (toll free) • 916.924.7323 (fax) • www.the-caa.org
**LEGISLATIVE APPOINTMENTS FORM**

**Legislative Appointments Form due Friday, March 17, 2017**

Appointments will be made as requests are received. Confirmation of your appointment(s) time and location will be provided on April 3, 2017 when you check in. Please contact Kim Oreno at (877) 276-1410 or koreno@the-caa.org for questions regarding legislative appointments. You must complete this form to make legislative appointments. Spouse, family and guests are welcome to attend legislative visits.

**COMPANY —**

Company ____________________________________________

Address _____________________________________________

City ___________________________ State ________ Zip__________

Phone __________________________ Fax ______________________

**ATTENDEES —**

Names of individuals from your company who will be making visits to legislators:

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**LEGISLATORS —**

Names of legislators (Senate and Assembly members) in the district of your RESIDENCE and the district in which you conduct BUSINESS:

Your RESIDENCE Legislators

__________________________________________

__________________________________________

__________________________________________

__________________________________________

Your BUSINESS Legislators

__________________________________________

__________________________________________

__________________________________________

__________________________________________

*Please complete by Friday, March 17, 2017 and return to:*

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2520 Venture Oaks Way, Suite 150, Sacramento, CA  95833

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SPONSORSHIP FORM

April 3 - 4, 2017 • Embassy Suites Hotel, Sacramento, CA

This agreement will constitute the entire understanding of our company’s sponsorship of ___________________________(Name of event you are sponsoring from list below) which will occur during the Annual Stars of Life Celebration and Legislative Summit of the California Ambulance Association. I have reviewed the document titled “Sponsorship Form” and understand the benefits that will be provided to our company in return for the sponsorship and the obligations of our company as a sponsor of the event.

COMPANY / ATTENDEE INFORMATION —

Company ____________________________ Contact Name_________________________ Date _________

Address _____________________________________________________________

City __________________________ State ________ Zip __________

Phone __________________________ Fax __________________________ E-mail ________________________

Signature __________________________

PAYMENT —

EVENT SPONSOR (April 3-4, 2017) ...................... $3,500

Event Sponsor will be recognized at all events occurring during the meeting. The Event Sponsor will be recognized through company name recognition on signs for the event and recognition by emcee of event. In addition, the Event Sponsor will be allowed to display promotional/marketing material by the Registration Desk. The Event Sponsor will also receive a free full-page advertisement in PDF format in the Quarterly issue of The Siren and 2 registrations to the event.

BREACKFAST (April 3, 2017) ...................... $1,500

Breakfast Sponsor includes sign and verbal recognition at event and table for displaying promotional/marketing material. The Breakfast Sponsor will also receive a free ½ page advertisement in PDF format in the Quarterly issue of The Siren and 1 registration to the event.

RECEPTION (April 3, 2017) ...................... $2,000

Reception Sponsor includes sign and verbal recognition at event and table for displaying promotional/marketing material. The Reception Sponsor will also receive a free ½ page advertisement in PDF format in the Quarterly issue of The Siren and 1 registration to the event.

DINNER (April 3, 2017) ...................... $2,500

Dinner Sponsor includes sign and verbal recognition at event and table for displaying promotional/marketing material. The Dinner Sponsor will also receive a free ½ page advertisement in PDF format in the Quarterly issue of The Siren and 2 registrations to the event.

SHUTTLE SPONSOR (April 3, 2017) ...................... $500

Shuttle Sponsor includes sign and verbal recognition at event. The Shuttle Sponsor will also receive a free ½ page advertisement in PDF format in the Quarterly issue of The Siren.

A/V SPONSOR (April 3, 2017) ...................... $500

A/V Sponsor includes sign and verbal recognition at event. The A/V Sponsor will also receive a free ½ page advertisement in PDF format in the Quarterly issue of The Siren.

STARS OF LIFE SHIRTS ...................... $1,000

Each Stars of Life recipient will receive a Stars of Life shirt which includes the sponsor's logo printed prominently on the shirt. Contact CAA staff for quantities and delivery dates.

COFFEE BREAK (April 4, 2017 – Morning) ............ $500

COOKIE BREAK (April 4, 2017 – Afternoon) ............ $500

PRIZE DONATIONS (April 3, 2017) ...................... $100 EACH

Examples of prizes include personal electronics, gift cards and airline tickets.

☐ Check payable to California Ambulance Association

☐ Mastercard ☐ Visa ☐ American Express

Card Number ___________________________ Exp Date __________ 3-4 Digit CID ______

Name on Card ___________________________

Address (if different from above) ___________________________

Signature ___________________________

Amount to be charged: __________

Sponsorships will be awarded on a first paid, first served basis. A minimum 50% deposit is due upon signing this agreement with the balance due by March 27, 2017.

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