



Alaska Pharmacists Association

57th ANNUAL CONVENTION AND TRADESHOW

EXHIBITOR CONTRACT & SPONSOR OPPORTUNITIES

Hilton Anchorage, February 17-19, 2023

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Contact Person (please print): _____

Check One: I will be staffing the booth I will not be staffing the booth—it will be:

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail(s) _____

- BOOTH Fee, \$1600 – Includes one 6 ft draped table w/ chair, and meals for up to two company representatives: Saturday Breakfast, Lunch & Evening Awards Reception**
- Exhibitor Classroom Presentation 30 min. (must have a booth), \$1000 (topic must be approved by AKPhA, minimum number of presentation requests required to cover the room costs).**
- Optional Addition \$200 – Business Card or Quarter Page Ad in Quarterly Newsletter**
- Sponsorship – Complimentary Booth included with a sponsorship of more than \$3,000.**

CONVENTION SPONSORSHIP OPPORTUNITIES (Indicate Item Below – booth fee waived with \$3,000+ sponsor)**

Buffet Breakfast, Saturday	\$3,500
Buffet Lunch, Saturday	\$3,500
Snack Break, Saturday	\$1,000
Saturday Evening Reception	\$3,500
Continental Breakfast, Sunday	\$2,000
Buffet Lunch, Sunday	\$3,000
Coffee Break Sponsor (Friday, Saturday, or Sunday)	\$500 each

General Convention Sponsor: _____ (Write in Amount)

E-mail: akpharmacistsassociation@gmail.com

OTHER ANNUAL SPONSORSHIP OPPORTUNITIES

Quarterly Newsletter Sponsor: **\$2,500**

Includes a full page color advertisement on back inside cover of each publication and acknowledgment as newsletter sponsor on back page.

Total Amount: _____

Sponsored Event(s) – Please indicate day and/or event:

Signature and Title: _____

Printed Name: _____ Phone Number: _____

E-mail: _____

Card# (VISA/MC/AMEX): _____ Exp: _____ CVV# _____

Name/Address of Cardholder: _____

Return to: Alaska Pharmacists Association (c/o Brandy Seignemartin) Email:

akpharmacistsassociation@gmail.com

OR Submit order information with credit card payment at: <https://alaskapharmacy.org/payments/>

The AKPhA Tax ID Number is 92-0079020.

Booth space is limited, so please RSVP ASAP & submit payment by January 9, 2023

While no booth reservation can be confirmed without payment, please let AKPhA know if you intend to exhibit at your earliest convenience. No refunds can be made after February 1, 2023.

HOTEL ROOM RESERVATIONS

A group rate of \$149 sgl/dbl occupancy is available for the convention. Please reference **Alaska Pharmacists Association 2023** and book rooms by February 9, 2023 to ensure availability and receipt of group rate. Reservations can be made by calling (907) 272-7411.

Exhibit Setup: Thursday & Friday, February 16 & 17, 3-5pm and 1:30 – 5:30 pm

Exhibit Teardown: Saturday, February 18, 2022 – 4:30 pm

SHIPPING OF PACKAGES—Send to:

Hilton Anchorage

500 West 3rd Avenue

Anchorage, AK 99501

Phone: (907) 272-7411

All incoming packages should be specifically labeled and addressed to the Exhibitor or guest receiving package and marked with **Alaska Pharmacists Association Convention**, February 17-19, 2023. Packages that arrive more than 5 days before or must be stored more than 2 days after the convention will be subject to fees from The Hilton.

E-mail: akpharmacistsassociation@gmail.com