

Optional Support Opportunities

Thank you for your interest in the APWCA and the support opportunities offered for the APWCA2009. Participation with that listed below allows your company to demonstrate its products and services to the multidisciplinary attendees and to the entire membership of the Association. Expand your company's visibility and demonstrate your commitment to education and quality care to all those who are clinically involved in wound care. Provide an opportunity for APWCA to acknowledge your support of its mission, goals and objectives to our membership.

Support and Provide an Educational Grant for any of the Following:

(* Partial support and other opportunities also available*)

Support Expenses for Faculty	\$ 3,500	Honorarium, Travel, Hotel Expenses, Printing of Notes, CME/CE (Determined fully by APWCA Scientific Committee)
VIP Faculty Dinner Invitations		Based on Level of Support
Your Company Name for APWCA2009 events	\$25,000	Multiple Options Please Contact APWCA for specifics
Company Inserts in Conference Bags	\$300	
Internet Café and Message Center	\$20,000	
Interactive Audience Response System	\$12,000	
Support Annual Scientific Address with Lunch Package	\$25,000	As determined by APWCA Scientific Committee
Meals in Exhibit Area (Partial Meal Sponsorship available)	\$6,000 - \$13,000 \$12,500 - \$25,000 \$ 3,000 - \$ 5,000 \$12,000 - \$25,000	Breakfast Lunch Coffee Breaks Conference Reception
Web Banner APWCA Web Site and Conference Page		Contact APWCA for specifics
Satellite Symposia		Contact APWCA for specifics
APWCA2009 Tote bags	\$10,000	Support already provided
Name Badge Holders	\$4,000	Contact APWCA for specifics
Lanyards		Support already provided
Hotel Room Keys		Contact APWCA for specifics
Cyber Center		Contact APWCA for specifics
Awards for Oral/Poster Abstracts		Contact APWCA for specifics
Program Book of APWCA2009	\$6,000 - \$12,000	
Advertising in APWCA2009 Program Book	\$375	¼ page (B & W only)
	\$500	Half page (B & W only)
	\$750	Full page (B & W)
	\$1,250	Full page (Color)
	\$1,000	Front Cover (Inside) (B & W)
	\$1,750	Front Cover (Inside) (Color)
	\$1,000	Back Cover (Inside) (B & W)
\$1,750	Back Cover (Inside) (Color)	
\$2,500	Back Cover (Outside) (Color)	
Exhibiting during APWCA2009		See enclosed or contact APWCA office



American Professional Wound Care Association
 853 Second Street Pike, Suite A-1, Richboro, PA 18954
 Phone (215) 364-4100 Fax (215) 364-1146
www.apwca.org wounds@apwca.org

APWCA2009
 April 2-5, 2009

Conference Hotel
 Sheraton Philadelphia City Center
 17th and Race Streets, Philadelphia, PA 19103
 Phone (215) 448-2000 Fax (215) 448-2853

APWCA is a non-profit 501-C6 organization.

Levels of Support and Suggested Corporate Packages

The APWCA offers many levels of support that provide visibility and acknowledgment. All of the suggested packages below can be modified by using that suggested on the enclosed Optional Support Opportunities document and many other options to best accommodate your budget and your needs.

All Grants provided are cumulative and therefore increase your level of support with each donation throughout the year.

Description of Benefit	Diamond \$75,000	Emerald \$50,000	Platinum \$25,000	Gold \$10,000	Silver \$5,000	Bronze \$3,500	Copper \$2,500
Company listed in APWCA2009 Program Book	x	x	x	x	x	x	x
Attendee registration list provided	x	x	x	x	x	x	x
Company listed on signs in common areas	x	x	x	x	x	x	x
APWCA web banner advertising	x (double sided)	x (double side)	x (single sided)				
E-mails sent to Members and Registered Attendees	5	3	2	x			
SYNERGY the APWCA Newsletter (as available)	x	x	x	x	x	x	x
Exhibit table signs and ribbons for name badges	x	x	x	x	x	x	x
Web site link with Prominent Logo and Description of Services/Supplies	x	x	x				
Web site link with Company Logo				x	x		
Web site link on APWCA "Links" Page	x	x	x	x	x	x	
Complimentary Exhibit Table	x (triple table)	x (triple table)	x (double table)	x (double)	x (single)		
Discounted Exhibit Table						x (single) \$700	x (single) \$900
Number of exhibitor representatives allowed per selected package§	12	8	5	4	2	2	2
Full Page Advertisement in Program Book	x (Color)	x (Color)	x (B&W)	x (B&W)			
Events named for your company, options include breakfast, lunch, evening reception and more	x	x	x				
Articles in the APWCA Synergy Newsletters discussing your services and/or products are sent by email to APWCA membership. Articles must be approved by APWCA Scientific Committee	x	x					
Contributions will support faculty expenses at APWCA2009	x	x	x	x			
Contributions will support faculty expenses at APWCA2009 and other APWCA conferences.	x	x					
Your support package is custom tailored	x	x	x				
Acknowledgment by APWCA in Advances in Skin and Wound Care, (the Medline indexed journal endorsed by the APWCA), to show your level of APWCA support to a readership of the journal is approximately 22,000.*	x Contact us to design a fully custom tailored program	x					

*Any announcement offered to be placed by APWCA in Advances in Skin and Wound Care must meet approval of the journal and the publisher (Lippincott, Williams and Wilkins), is not guaranteed and should be discussed with APWCA prior to commitment of your grant



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Supporter/Exhibitor Registration Form

Contact Information: (Please type or print)

Contact Name		Title/Degree	Position (if applicable)	
Company Name			Name Request for <u>Exhibit Table Sign</u>	
Street Address		City	State	Zip
Phone (include extension if needed)	Fax	E-mail (required for registration confirmation)		
Product or Service to be displayed				

(√)	Level of Support Opportunities:	Value of Grant to be provided:	Remarks: Benefit details, please refer to page 2, § Support Levels and Suggested Corporate Packages
	Diamond	\$75,000	\$ TRIPLE Exhibit Table and 12 Reps included
	Emerald	\$50,000	\$ TRIPLE Exhibit Table and 8 Reps included
	Platinum	\$25,000	\$ DOUBLE Exhibit Table and 5 Reps included
	Gold	\$10,000	\$ SINGLE Exhibit Table and 4 Reps included
	Silver	\$5,000	\$ SINGLE Exhibit Table and 2 Reps included
	Bronze	\$3,500	\$ *Discounted Single Table @\$700 and 2 Reps included
	Copper	\$2,500	\$ *Discounted Single Table @\$900 and 2 Reps included
(√)	Exhibit Table Opportunities:	Exhibit Table Fee:	Remarks:
	DOUBLE Table (before 1/15/2009)	\$2,000	\$ 2 Reps included
	DOUBLE Table (after 1/15/2009)	\$2,200	\$ 2 Reps included
	SINGLE Table (before 1/15/2009)	\$1,100	\$ 2 Reps included
	SINGLE Table (after 1/15/2009)	\$1,200	\$ 2 Reps included
	*Bronze Discounted Single Table	\$700	\$ 2 Reps included
	*Copper Discounted Single Table	\$900	\$ 2 Reps included
	Additional Representative(s) Please specify how many additional representative(s) 	\$90 Per Person	\$ Additional Representative(s), please add \$90 pp
TOTAL Support/Exhibit Amount:		\$	

Refund Policy for Exhibitor:

- Cancellations made in writing and postmarked by February 1, 2009 will receive a refund less a \$100.00 administrative fee.
- Cancellations MUST be made in writing and postmarked by March 1, 2009 to receive a 50% refund.
- No Refunds will be given after March 1, 2009. No refunds for "no-shows"

Payment Information: (Please check)

Payment by Check (payable to **APWCA**) Check No. _____ Check Amount: \$ _____
 Payment by Credit Card: Visa MasterCard Amex Discover

Credit Card Number: _____ Exp. Date: _____

Cardholder Name: _____ Signature: _____

To register or if any questions: (Do not send this Form by email with Charge Card Information. Site not secured. Exhibitors may also register
 Mail To: [online through our secured Web Site Exhibitor Registration Page. www.apwca.org](http://www.apwca.org))



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Supporter/Exhibitor Representative Badge Form

Contact Information: (Please type or print)

Contact Name		Title/Degree	Position (if applicable)	
Company Name				
Street Address		City	State	Zip
Phone (include extension if needed)	Fax	E-mail (required for registration confirmation)		

Please list representatives below.

§ Please Refer to Page 2, [Supporter Levels and Suggested Corporate packages](#) for details for Representative(s).

Name (as it should appear on your badge)	Title/Degree	Position (if applicable)
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Name (as it should appear on your badge)	Title/Degree	Position (if applicable)
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Please complete this Form and Fax it to (215) 364-1146 by February 5, 2009.
Contact APWCA at (215) 364-4100 for any questions.



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Advertising Options and Agreement

Contact Information: (Please type or print)

Contact Name		Title/Degree	Position (if applicable)	
Company Name				
Street Address		City	State	Zip
Phone (include extension if needed)	Fax	E-mail (required for registration confirmation)		

Advertising Space is available in the **APWCA2009** syllabus as follows:

Please check applicable:

	Size	Rate
<input type="checkbox"/> QUARTER page advertisement	3 5/8" x 4 7/8" (B&W)	\$ 375
<input type="checkbox"/> ONE-HALF page advertisement	7 1/2" x 4 7/8" (B&W)	\$ 500
<input type="checkbox"/> FULL page advertisement	7 1/2" x 10" (B&W)	\$ 750
<input type="checkbox"/> FULL page advertisement	7 1/2" x 10" (COLOR)	\$1,250
<input type="checkbox"/> FULL page advertisement inside front cover	7 1/2" x 10" (B&W)	\$1,000
<input type="checkbox"/> FULL page advertisement inside front cover	7 1/2" x 10" (COLOR)	\$1,750
<input type="checkbox"/> FULL page advertisement inside back cover	7 1/2" x 10" (B&W)	\$1,000
<input type="checkbox"/> FULL page advertisement inside back cover	7 1/2" x 10" (COLOR)	\$1,750
<input type="checkbox"/> FULL page advertisement outside back cover	7 1/2" x 10" (B&W)	\$2,000
<input type="checkbox"/> FULL page advertisement outside back cover	7 1/2" x 10" (COLOR)	\$2,500

Payment Information: (Please check)

Payment by Check (payable to APWCA) Check No. _____ Check Amount: \$ _____
 Payment by Credit Card: Visa MasterCard Amex Discover

Credit Card Number: _____ Exp. Date: _____

Cardholder Name: _____ Signature: _____

Rules & Regulations:

- Advertising Space is available to companies whether or not they exhibit at **APWCA2009**
- APWCA retains the right to refuse and/or reject advertising copy
- Advertising Space is available on a first-come basis
- All Advertising Material must be submitted **PHOTO READY/PDF FILE** by January 15, 2009
- **No refund for cancellation**

Please send this Form with payment by January 15, 2009.