

EXHIBIT SPACE & SUPPORT APPLICATION

WOUND WEEK™ 2020 • FOR CLINICIANS, BY CLINICIANS • APRIL 16-19, 2020 | MILWAUKEE, WI

Company Name _____

Address _____

City _____ State _____ Zip _____

First Name _____ Last Name _____

Work Phone _____ Mobile Phone _____

Email _____ Signature _____

PAYMENT REGISTRATION

Upon receipt of application, an invoice will be sent to the email address provided above with online credit card and Check payment options.

Payments must be received prior to the meeting date; move-in will not be permitted without final payment.

APWCA is a 501(c)(6) non-profit organization, Tax ID 23-3078561. A W-9 is available upon request.

- **Credit Cards**
3% processing fee, all major credit cards accepted
- **Checks**
Payable to APWCA, mail to:
6737 West Washington Street, Suite 4210
Milwaukee, WI 53214

EXHIBIT SUPPORT

exhibits@apwca.org

TABLETOP CANCELLATIONS

Cancellations must be provided in writing; refunds will be as follows:

- 50% penalty on/after February 17, 2020 – before March 15, 2020
- No refunds will be given after March 16, 2020 – no refunds for “no-shows”

SUPPORT OPPORTUNITIES

- Platinum Sponsor Package** \$40,000
- Gold Sponsor Package** \$30,000
- Silver Sponsor Package** \$20,000
- 1 Premium Exhibit Tabletop** \$6,000
- 1 Exhibit Tabletop** \$4,000
- Conference Tote Bags** \$6,000
- Name Badge Lanyards** \$5,000
- Exhibit Refreshment Break** \$5,000
- Hands-On Workshop** \$2,000
- Breakfast Symposium**..... \$10,000
- Lunch Symposium** \$15,000
- Conference Program Ad** \$ _____
- Other** \$ _____

TOTAL \$ _____

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#WoundWeek2020

414-488-3913 | exhibits@apwca.org

| www.woundweek.com