

ASHT ANNUAL MEETING 2025 APPLICATION



PRIMARY CONTACT INFORMATION (HANDLES ALL CONFERENCE/MARKETING LOGISTICS)

Contact Name _____

Contact Title _____

Contact Email _____

Contact Office Phone _____

Contact Mobile Phone _____

I am an authorized representative of the company named above with the full power and authority to sign and deliver this application. The company listed on this application agrees to comply with all the policies, rules, terms, conditions, regulations, code of conduct contained in the exhibitor prospectus and online.

Signature _____

INFORMATION FOR PROMOTIONS AND BILLING PURPOSES (THIS WILL BE USED FOR ALL ASHT PROMOTIONS)

Company Name _____

Address _____

City _____ State _____ ZIP _____

Main Phone _____ Website _____

IN-PERSON EXHIBIT PACKAGE

☐ 10 X 10 In-line Booth..... \$2,750 Per
Qty. _____

☐ 10 X 10 Corner Booth..... \$3,000 Per
Qty. _____

VIRTUAL EXHIBIT ONLY

☐ Virtual Exhibit Directory..... \$750

PEDIATRIC SPECIALTY DAY EXHIBIT BOOTH

☐ ASHT Exhibitor..... \$1,500

☐ Non-Exhibitor..... \$1,750

POCKET PROGRAM

☐ Back Cover \$1,750

☐ Inside Back Cover \$1,500

☐ Inside Front Cover..... \$1,500

☐ Full Page..... \$1,000

ADVERTISING

☐ Annual Meeting Website Ad \$1,000

☐ Mobile App Push Notification \$1,000

☐ Mobile App Banner Ad \$750

BRAND EXPOSURE

☐ Tote Bags Sponsor..... \$7,500

☐ Water Bottle Sponsor \$8,000

☐ Notepad \$4,000

☐ Lanyards..... \$6,000

☐ WiFi Sponsor \$6,000

☐ Hotel Key Cards..... \$6,000

☐ Under-Door Drop \$3,500

☐ Tote Bag Insert..... \$2,000

☐ Seat Drop \$2,000

☐ Headshot Studio Sponsor \$7,500

☐ ePoster Sponsor \$6,000

☐ Charging Station \$7,500

☐ Registration Sponsor \$5,000

☐ Meterboard Sign \$2,500

SPEAKING OPPORTUNITIES

☐ Affiliate Symposium \$5,000

☐ Hands-On Demonstration \$3,000

VIRTUAL AFFILIATE EVENT OPPORTUNITIES

☐ Learning Hour \$2,500

PAYMENT INFORMATION

☐ Invoice me for payment by **check** or **secured payment link** ☐ Invoice me for payment by **wire transfer** or **ACH**.

☐ Please charge my **credit card** below:

☐ Visa ☐ Master Card ☐ American Express

Name on Card _____

Account Number _____ Exp. Date _____ Security Code _____

City _____ State _____ Zip _____

Total _____

Signature _____

It is important to note that most banks charge a service fee for wire transfers. ASHT charges a flat fee of \$25.00 USD for all payments being made by wire transfers to cover any bank service fees that are imposed. This additional amount will be reflected in your invoice.

SPONSORSHIP AND EXHIBIT APPLICATION TERMS

1. The undersigned agrees to pay 100% of all fees per the terms of this application made payable to ASHT.
2. Any company requesting to pay later than net 30 days after the receipt of invoice, agrees to pay a deposit in the amount equivalent to the cancellation processing fee.
3. All cancellations must be submitted to ASHT in writing. A refund, less a 50% cancellation fee for the cancelled space is available until June 20, 2025. After June 20, 2025 there are no refunds. All purchases after June 20, 2025 are non-refundable and non-transferrable.
4. Exhibitors/sponsors and/or advertisers are responsible for ensuring the accuracy of all advertising content. ASHT is not responsible for grammatical, spelling, or other errors appearing in the content of published advertising.
5. Advertisers assume liability for all content of published advertising and assume responsibility for all claims against ASHT resulting from their advertising.

****By exhibiting, sponsoring or registering for an ASHT program (virtual or in person), I acknowledge that all are subject to ASHT's Program Code of Conduct Policy.**