***VENDOR SPONSORSHIP***

**2021 WPHA ANNUAL CONVENTION HELD IN SARATOGA, WYOMING JUNE 25-27, 2021**

COMPANY INFORMATION

Name of Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Representatives attending exhibit program: 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(for name badges) 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Fee required for additional representatives)

**Brown & Gold Sponsor**

* $2500 includes vendor booth, recognition in pre-convention promotional brochures, two (2) free registrations, special recognition in conference program book, special signage at the event, special recognition at the awards banquet, and free full-page ad in the WPHA newsletter, *The Pharmacy Post,* throughout the year.

**Friday Reception Sponsor Break Sponsor**

Co-Sponsor (2) at $300 Co-Sponsor (2) at $200

Sponsor at $600 Sponsor at $400

**Saturday Awards Banquet Sponsor Saturday or Sunday Breakfast Sponsor**

Co-Sponsor (3) at $750 Co-Sponsor (2) at $500

Sponsor at $2250 Sponsor at $1000

**Saturday Lunch Sponsor Vendor Booth**

Co-Sponsor (2) at $500 Table in Exhibit Area $750

Sponsor at $1000 Program Book Advertising $150 full page, $75 half page

**VENDOR BOOTH DESCRIPTION:**

The final program book distributed to all meeting registrants includes descriptions of each exhibitor, its products, and services. To be included in this section, please submit a description of your products or services in 50 words or less. You may use the space below or a separate sheet.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to request a booth with electrical access. (Register early as we only have a limited number of booths with electrical access available.

 We are unable to attend this year but would like to support the convention by contributing $ \_\_\_\_\_\_\_\_\_

 We understand that materials can be disbursed on our behalf in the vendor area.

Make checks payable to: WPHA – “Annual Convention 2021” in memo (WPHA TAX ID 83-0281451)

Wyoming Pharmacy Association

Po Box 9

Wheatland, WY 82201 director@wpha.net