

HÉROES EN HOSPITALES 2023

May 5, 2023 (9:00am-2:00pm)

The Royal Sonesta Hotel (Isla verde), Carolina Puerto Rico

Exhibit/Sponsor Contract



CONTACT INFORMATION

First Name:	Last Name	2 nd Last Name
Organization:		Title:
Address:		
City:	St	ate: Zip Code:
Telephone:	Fax:	E-mail:

_ TABLETOP SPONSOR: \$800

Includes: Admission for 2 persons (1 for the table and 1 education participant), one standard 6'x30" skirted table with two chairs, logo, and mention (wireless internet connection available for extra fee).

___ COFFEE BREAK SPONSOR: \$1,000 ___ AM ___ PM

Includes: Banner placement, admission for 3 persons (1 for the table and 2 education participants), one standard 6'x30" skirted table with two chairs, logo and mention (wireless internet connection available for extra fee).

____ BREAKFAST SPONSOR: \$2,000

Includes: Banner placement, admission for 4 persons (1 for the table and 3 education participants), one standard 6'x30" skirted table with two chairs, logo, and mention (wireless internet connection available for extra fee).

____ LUNCH SPONSOR: \$3,000 or ____ COCKTAIL RECEPTION SPONSOR: \$3,000

Includes: Logo on screen, 5 minutes address to participants at lunch/ coctel (if chosen), banner placement, admission for 5 persons (1 for the table and 4 education participants), one standard 6'x30" skirted table, with two chairs, logo on program (wireless internet connection available for extra fee).

_ SECONDARY SPONSOR: \$3,000

Includes: Logo on screen, 5 minutes address to participants, banner placement, admission for 5 persons (1 for the table and 4 education participants), one standard 6'x30" skirted table with two chairs, logo on program (wireless internet connection available for extra fee).

____ PRINCIPAL SPONSOR: \$5,000

Includes: Logo on screen, 5 minutes address to participants <u>at the beginning</u>, banner placement, admission for 8 persons (1 for the table and 7 education participants), one standard 6'x30'' skirted table with two chairs, logo on program (wireless internet connection available for extra fee).

PAYMENT INFORMA	TION	Total: \$			
□ C	Check	🗆 Visa	Mastercard		□ ACH
Card Number:				_ Expiration Date	e:/
Card Name:				Sec Code:	
Cardholder's signatu	re:			_	

ADDITIONAL CONTRACT TERMS AND CONDITIONS: Set-up will take place April 20, 2023; after 2:00pm. All tabletops must be taken down before 5:00 pm on the day of the event. A signed contract and full payment are required in order to reserve your tabletop space and/or sponsorship reservation. I have read this Exhibit Contract and agree to abide by the terms and conditions established therein.

Puerto Rico Hospital Association

Exhibitor's/Sponsor's Authorized Signature

Date

<u>Cancellation Policy</u>: Payment needed to guarantee registration. No charge for cancellations received before April 25, 2023. Late cancellations will be charged 50% of the corresponding FEE. **After April 30, 2023, there will be no refunds.** ASOCIACIÓN DE HOSPITALES DE PUERTO RICO, Villa Nevárez Professional Center, 120 Calle 2, Suite 101, San Juan, PR 00927-5303 **Tel. (787) 764-0290** Fax (787) 753-9748

educativas@hospitalespr.org