

AUPHA



PROGRAM SPONSORSHIP OPPORTUNITIES



**RESILIENCY
AND RELEVANCE
IN A TIME OF CHANGE**

**JUNE 12 – 14, 2019
NEW ORLEANS**

**Association of
University Programs in
Health Administration**

1730 M Street, NW, Suite 407
Washington, DC 20036

(202) 763-7283

www.aupha.org

Sponsorship Packages

PLATINUM SPONSOR | \$10,000

- ▶ Onsite recognition on signage, in program, and at all keynote sessions (VALUE \$2000)
- ▶ Recognition on AUPHA web site and in all pre-event marketing and event listings (VALUE \$3000)
- ▶ Full-page color ad in meeting program* (VALUE \$750)
- ▶ Banner ad on Annual Meeting web site (VALUE \$700)
- ▶ Color banner ad on Eventsential, the meeting's digital app (VALUE \$500)
- ▶ One (1) exhibit space at the Annual Meeting (VALUE \$1500)
- ▶ Two (2) full conference registrations* (VALUE \$1800)

SILVER SPONSOR | \$2,500

- ▶ Onsite recognition on signage, in program, and all keynote sessions (VALUE \$2000)
- ▶ Recognition on AUPHA web site and all pre-event marketing and event listings (VALUE \$3000)
- ▶ Half-page color ad in meeting program* (VALUE \$450)
- ▶ Banner ad on Annual Meeting web site (VALUE \$700)
- ▶ One (1) full conference registration* (VALUE \$900)

GOLD SPONSOR | \$5,000

- ▶ Onsite recognition on signage, in program, and all keynote sessions (VALUE \$2000)
- ▶ Recognition on AUPHA web site and all pre-event marketing and event listings (VALUE \$3000)
- ▶ Half-page color ad in meeting program* (VALUE \$450)
- ▶ Banner ad on Annual Meeting web site (VALUE \$700)
- ▶ One exhibit space at the Annual Meeting (VALUE \$1500)
- ▶ One (1) full conference registration* (VALUE \$900)

BRONZE SPONSOR | \$1,000

- ▶ Onsite recognition on signage, in program, and all keynote sessions (VALUE \$2000)
- ▶ Recognition on AUPHA web site and all pre-event marketing and event listings (VALUE \$3000)

* It is the sponsor's responsibility to notify AUPHA no later than **January 1, 2019** if you plan to take advantage of any/all of these benefits.

ABOUT OUR MEETING....

Attendance at the Annual Meeting continues to grow each year, bringing together graduate and undergraduate faculty to share ideas and proven practices in educating future practitioners in health management.

WHAT YOUR PARTICIPATION MEANS....

Your contribution in any amount will be used to continue to provide the highest level of services, programs, and initiatives that support the field of healthcare management education. We have set the bar high and only our members, the association's most valuable resource, can help us reach it.

We thank you for your generosity and continued support!





Program Sponsorship

PLEASE PRINT.

Name _____

Title _____

E-mail _____

Telephone _____

Contact Signature _____

(AUTHORIZING CONTRACT)

Name of Program _____

Name(s) of Complimentary Registration(s) _____

(IF APPLICABLE)

Payment Information

METHOD OF PAYMENT: PLEASE CHECK ONE.

Check

Credit Card Number _____

Expiration Date _____

Name as it appears on the card _____

Signature _____

Invoice Requested

By signing below, _____ agrees to pay \$_____ towards sponsorship of the 2019 AUPHA Annual Meeting. If payment is not received by **April 1, 2019**, AUPHA will not be able to acknowledge your organization in any printed materials or on the web site.

Authorized Signature _____

Date _____

Printed Name _____

Title and Organization _____

TOTAL PAID

HOLD HARMLESS CLAUSE: The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor's activities on the Hotel premises and will indemnify, defend, and hold harmless the Hotel, its owner, and its management company, as well as their respective agenda, servants, and employees from any and all such losses, damages, and claims.

Contract and acknowledgement of exhibit/advertisement in printed materials and online will not be processed until payment is received by AUPHA. Incomplete applications will be returned. Please fill out entire form and return with payment to:

**Mail to: AUPHA
1730 M Street, NW, Suite 407
Washington, DC 20036**

- ▶ Please print this form and return to AUPHA, along with your payment, no later than **April 1, 2019**.
- ▶ Camera-ready artwork for advertisements and signage must be received/confirmed no later than **April 1, 2019**.
- ▶ In order to maximize your organization's participation as a sponsor, please email a high-resolution version of your logo (both .eps and .jpg) to jwalker@aupha.org no later than **April 1, 2019**.

Thank you for your generosity and support.

Print & Banner Ad Specifications

Program Full-Page Ad

- ▶ Please submit your full color advertisement in .pdf format to jwalker@aupha.org no later than **April 1, 2019**.
- ▶ Ad should measure exactly 7.75 in wide x 10.25 in high, with no bleed.
- ▶ Please save the .pdf as either “high quality” or “press quality.”

IMPORTANT: This ad requires the exact specs as stated above in order to fit properly in the digital program.

Program Half-Page Ad

- ▶ Please submit your full color advertisement in .pdf format to jwalker@aupha.org no later than **April 1, 2019**.
- ▶ Ad should measure exactly 7.75 in wide x 5.5 in high, with no bleed.
- ▶ Please save the .pdf as either “high quality” or “press quality.”

IMPORTANT: This ad requires the exact specs as stated above in order to fit properly in the digital program.

Annual Meeting Web Site Banner Ad

- ▶ Ad should be submitted in .gif or .jpg format.
- ▶ Ad should be vertical and 120 px wide x 600 px high.
- ▶ Ads will be placed on the site from date of payment until the end of the 2019 Annual Meeting on June 14, 2019.

IMPORTANT: All ads submitted must meet the exact specs stated above in order to fit in AUPHA's web site.

Eventsential: AUPHA's Meeting App Ad

- ▶ Ad should be submitted in .gif or .jpg format. No animated gifs.
- ▶ Ad should be horizontal, 300 px wide x 50 px high.



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2019



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