



# EXHIBITORS REGISTRATION FORM

MSHP ANNUAL SEMINAR 2009  
Beau Rivage Hotel  
Biloxi, MS  
July 30 – August 1

Company Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Representative Name(s) \_\_\_\_\_

**NOTE: If any of your total expenses exceed \$750, then the exhibit fee will be waived.**

- Corporate Sponsorship \$2500 annually**  
(includes complementary exhibit space, six annual memberships, special recognition at all MSHP events, and *MSHP Newsletter* advertising space)
- Exhibit display \$750**  
Exhibit times: Set up on Thursday from 2:00-6:00pm  
Thursday Grand Opening Reception from 6:00-8:30pm  
Friday 9:30-10:30am
  - Exhibit fee of \$750.00 enclosed
  - To be sent under separate cover
  - Other \_\_\_\_\_
- Speaker Sponsorship (contact Jennifer Fowler Sample jlfowler@pharmacy.umsmed.edu)**
- Meals**  
Banquet – Full Funding (\$5000) Partial (\$\_\_\_\_\_ as co-sponsor)  
Breakfast Funding (\$2000) (\$\_\_\_\_\_ as co-sponsor)
  - Refreshment Break (\$400)
  - Door Prize(s) – Please specify prize(s): \_\_\_\_\_
  - Educational Grant \$ \_\_\_\_\_
- Banquet Tickets (\$50 per ticket) \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

MSHP Tax ID #64-0638589

Return to:  
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