

**Kentucky Pharmacists Association
2012 Annual Meeting Exhibitor and Sponsor Registration**

Company Name _____

Primary Contact _____

Address _____

City, State Zip _____

Phone _____ Fax _____ Email _____

Booth Representatives

1. _____ 2. _____

If possible, please do not locate us by the following companies:

Please contact Leigh Dalton at leigh.dalton@marriott.com or 859-288-6137 if you will require electrical or internet access.

\$ _____ Booth fee (\$1,000 single/\$1,795 double)

Sponsors will be printed on all meeting materials (listed according to level), receive special recognition, signage, and a priority location in the KPhA Hall of Exhibitors.

\$ _____ Friend of the Profession (\$5,000-\$10,000)

\$ _____ Event Sponsor (\$1,000-\$4,999 call for available events)

\$ _____ KPERF Golf Scramble Hole Sponsor (\$150)

\$ _____ Annual Meeting Supporter (\$100-\$999)

\$ _____ Sponsoring Pharmacy's Future-minimum of \$100 (Student Sponsorship)

\$ _____ **Total**

Please make checks payable to KPERF with KPhA Annual Meeting in the memo line.

Credit Card:

134th Annual Meeting

Card# _____ Exp. Date _____

Name as it appears on card _____

Billing Address: _____

Note: *Payments to KPhA are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible as general business expenses or for other reasons under U.S. tax regulations. KPhA's Tax Identification Number is 61-0246386.*

Please mail payment to: Kentucky Pharmacists Association, Annual Meeting, 1228 US 127 South, Frankfort, KY 40601

Kentucky Pharmacists Association, 1228 US 127 South, Frankfort, KY 40601

Phone: 502-227-2303 | Fax: 502-227-2258

**KPhA Hall of Exhibitors
Dedicated Hours***

Thursday, 6/14/2012

5:30-7:30 p.m.

Friday, 6/15/2012

9:00-11:30 a.m.

* Exhibitors may remain open through Friday and Saturday while the meeting continues.