



TPA SUMMER MEETING SUPPORT OPPORTUNITIES

July 18-20, 2016

We invite you to be a supporter at our Summer Meeting scheduled for July 18 – 20, 2016 which will be held at the Grand Hotel Marriott Resort in Point Clear, Alabama.

This meeting gives you the opportunity for your name to be in front of members of the Tennessee Society of Student Pharmacists, members of the Tennessee Society of Health-System Pharmacists, and members of the Tennessee Pharmacists Association.

Your name will appear in all meeting materials and be acknowledged with signage. We want our members to know you and to know that you support our profession.

WAYS TO SUPPORT (CHOOSE FROM THE LIST BELOW) ✓		
Afternoon Refreshments		
Tuesday, July 19	\$1,000	
Wednesday, July 20	\$1,000	
Awards Reception - Tuesday, July 19	\$3,500	
Closing Event – Wednesday, July 20		
Beverages	\$2,500	
Dinner	\$5,000	
Entertainment	\$3,000	
Continental Breakfast		
Tuesday, July 19	\$1,500	
Wednesday, July 20	\$1,500	
General Educational Session Support	\$2,000	
Golf Tournament – Monday, July 18		
Beverage Cart	\$350	
Continental Breakfast	\$250	
Hole Sponsor	\$250	
Lunch	\$500	
Prizes	\$400	
Mid-Morning Refreshments		
Tuesday, July 19	\$1,000	
Wednesday, July 20	\$1,000	
Networking Lunch, July 19	\$2,500	
Officer Installation & Honors Luncheon Wednesday, July 20	\$3,000	
Opening Reception – Monday, July 18	\$5,000	
Other ways to Support!		
You name the price!	\$	
Be in the Bag (Small promotional items placed in the	\$500	
Company Name imprinted on Registration Envelopes (Artwork must be received by June 1, 2016)	\$350	
Support a Student (Covers meeting registration fee for student(s). Your logo will appear on their name badge!)	\$295/ student	
Past Presidents/Veterans Breakfast	\$2,000	

PREFER TO BE A CORPORATE SPONSOR?		
We offer corporate sponsorships! These sponsorships, offered at various levels listed below, provide your company with even more visibility!		
Choose your sponsorship level		✓
Platinum Sponsor	\$10,000	
Gold Sponsor	\$5,000-9,999	
Silver Sponsor	\$2,500-4,999	
Bronze Sponsor	\$1,500-2,499	

YES, WE WANT TO SUPPORT TPA!

Total support (items checked) \$ _____

Company _____

Billing Address _____

City _____ **State** _____ **ZIP** _____

Phone _____

Email _____

Contact Name _____

Check: Full amount enclosed:
(payable to TPA) \$ _____

Credit card: AmEx VISA MasterCard

CC # _____

Exp. Date ____/____/____ Security Code _____

Name on card _____

Billing Address _____

City _____ State _____ ZIP _____

Signature (REQUIRED) _____

PAYMENT Full payment should accompany the reservation form.

MAIL COMPLETED FORM AND PAYMENT TO:
Tennessee Pharmacists Association
500 Church Street, Suite 650
Nashville, TN 37219