

Application and Contract for Tabletop Display

Advancing the Science of Study Endpoints

December 5-6

Omni Shoreham Hotel | Washington, DC



Company Contact Information

Exhibiting Company Name (for signage and directory listing)

Contact Name (all correspondence will be sent to the contact information provided below)

Address Line 1

Address Line 2

City, State, Postal Code, Country

Telephone Number

Email Address (required for confirmation)

Tabletop Rates and Information

TABLETOP ONLY. Tabletop display cost includes one skirted table, one chair, and one electrical outlet. Exhibitors may not sublet or share any part of the space allocated to another company. Additional marketing opportunities are only available to exhibiting companies.

Tabletop Rental* & Additional Marketing Fees

- ☐ **TABLETOP RENTAL** **US \$1,500**
- ☐ **Email Banner Ad** **Add US \$250**
Exclusive opportunity: Exhibitor to provide email banner and URL to be included in two DIA eBlasts to all meeting participants: the eBlast sent out a few days prior to the meeting and the eBlast sent out within a week after the end of the meeting.
- ☐ **Attendee eBlast** **Add US \$595**
Only 2 Opportunities Available: Exhibitor provided (DIA approved) content and graphics in a Biosimilars 2016 branded email sent to all meeting participants on scheduled date within the two weeks leading up to the meeting
- ☐ **Reception Bar Host**
Only 2 Opportunities Available: Everyone loves the bar host! Add your company logo to our directional signage outside the reception area and pass out cocktail napkins with your company logo with every drink ordered at your hosted bar.
- | | Exhibitor Price | Standard Price |
|------------|------------------------|-----------------------|
| Add | US \$925 | US \$1,225 |

*Rental fees are for tabletop only and must be paid in advance. All tabletop staff must register as an attendee for the conference. At least one person must be registered to staff each tabletop. Tabletop rental is required in order to purchase additional marketing opportunities.

Only one 30" x 72" table, chair, and electrical outlet will be provided per tabletop display.

All display materials must be placed on surface of the table, pop-up displays that sit on top of the table may be used. No additional equipment may be placed in surrounding area, with the exception of floor banners (one per table; maximum size of 30" wide by 72" high) in the vicinity of your tabletop if space allows. No signs, banners, flags, etc. may be displayed from ceiling or walls, but are acceptable if attached to table.

No security arrangements will be provided. All materials are the responsibility of the exhibitor.

Advertisements and/or Announcements for non-DIA Sponsored Meetings/Workshops cannot be distributed or promoted at the workshop.

Exhibitor events and meetings must be approved by DIA and cannot be held during DIA meetings or events.

If DIA cannot verify your membership, you will be charged the nonmember fee. Registration fee includes refreshment breaks, luncheons, and reception (if applicable), and will be accepted by mail, fax, or online.

INDUSTRY RATES	BY NOV. 14	AFTER NOV. 14
MEMBER INDUSTRY	US \$1450 <input type="checkbox"/>	US \$1600 <input type="checkbox"/>
NONMEMBER** INDUSTRY	US \$1700 <input type="checkbox"/>	US \$1850 <input type="checkbox"/>

DISCOUNT RATES*	BY NOV. 14	AFTER NOV. 14
MEMBER GOVERNMENT (Full-time)	US \$650 <input type="checkbox"/>	US \$800 <input type="checkbox"/>
NONMEMBER** GOVERNMENT (Full-time)	US \$900 <input type="checkbox"/>	US \$1050 <input type="checkbox"/>
MEMBER NONPROFIT/ACADEMIA (Full-time)	US \$650 <input type="checkbox"/>	US \$800 <input type="checkbox"/>
NONMEMBER** NONPROFIT/ACADEMIA (Full-time)	US \$900 <input type="checkbox"/>	US \$1050 <input type="checkbox"/>

**Discount rates are subject to eligibility requirements. Identification and proof of eligibility will be required on site. Failure to provide proof of eligibility/ID upon request will require paying the higher industry registration fee.*

DIA MEMBERSHIP

All nonmember fees include a one year membership option. If you registered at one of the nonmember rates noted above, **you will automatically become a DIA member. If you do not want a membership, please indicate your preference below.

☐ **I DO NOT** want DIA membership

Payment Options and Information

Payment may be made by check, credit card, or bank transfer. Please note that tabletops will not be assigned without proper payment and companies with an outstanding balance will be prohibited from moving in at the Omni Shoreham Hotel.

☐ **Credit Card** payments by **Visa, MasterCard, or American Express:**

☐ **VISA** ☐ **MC** ☐ **AMEX**

Cardholder's Name:

Card Number:

Exp. Date:

Signature:

☐ **Checks** drawn on a US bank payable to and mailed along with a copy of this form to:

Drug Information Association, Inc.

P. O. Box 95000-1240

Philadelphia, PA 19195-1240, USA

☐ **Bank Transfer** When DIA completes your registration, an email will be sent to the address on the application form with instructions on how to complete the Bank Transfer. Payment should be made in US dollars. Your company name, as well as the Meeting ID 16010 must be included on the transfer document to ensure payment to your account.

Cancellation Policy

Cancellations **MUST** be in writing and received at the office on or before **November 9, 2016**. An administrative fee will be withheld from refund as follows: Tabletop = \$750; Additional Marketing Opportunities = No Refund; Attendee Registration = \$200; Short Course Registration = \$200. Cancellation requests received after **November 9, 2016** and do not attend will be responsible for the full fee paid. Registrants are responsible for canceling their own hotel and airline reservations. You may transfer your registration to a colleague at any time but membership is not transferable. Please notify DIA of any such substitutions as soon as possible. Substitute registrants will be responsible for nonmember fee, if applicable. DIA reserves the right to alter the venue, if necessary. If an event is cancelled, DIA is not responsible for any airfare, hotel or other costs incurred by registrants.

Contract Signature

Exhibitor agrees to indemnify and hold harmless the Drug Information Association, its officers, directors, employees and members from any and all liability for losses, damages, and claims arising out of injury or damage to Exhibitor's displays, equipment and other property brought on the premises of the exhibition site by Exhibitor and for losses, damages and claims caused by the Exhibitor to the exhibition site. Exhibitor further agrees to indemnify and hold harmless the Drug Information Association, its officers, directors, employees and members from any and all liability to any person or persons for or by reason of any act or omission of said Exhibitor or any of its employees, agents, servants or employees. Exhibitor, by signing the Application, expressly releases the foregoing named association and individuals from any and all liability for losses, claims, damages, and injury.

Authorized signature

Date

Attending Exhibitor Information and Registration Fees

☐ Dr. ☐ Mr. ☐ Ms.

☐ Check here if already registered

Last Name

First Name

M.I.

Job Title

Affiliation (Company)

Address (Please write your address in the format required for delivery to your country.)

City, State, Postal Code, Country

Telephone Number

Email Address

Completed applications should be emailed to Americas.Exhibits@DIAglobal.org

All applications must be reviewed by DIA for approval before admission is granted.