

## Oregon Society of Health-System Pharmacists



# 2009 Exhibit, Grant & Sponsorship Program

Dear Pharmaceutical Industry Representatives and Wholesaler Representatives:

The pharmaceutical industry and Oregon Society of Health-System Pharmacists (OSHP) for many years have enjoyed a relationship that has been mutually beneficial to both parties.

OSHP would like to continue this relationship and give you the opportunity to become a member of OSHP. Membership in OSHP will give you a voice in the development of different opportunities through the various councils. By working together, manufacturers, wholesalers, and pharmacists can provide a way to continue a great working relationship that can benefit all.

Enclosed within, OSHP has put together a packet of information on grant and sponsorship opportunities for 2009. Please review the information and contact the appropriate people for further information.

The following pages include information on and the availability for sponsorship:

1. Sponsorship levels (see **Grant and Sponsorship Program**)
2. Sponsorship opportunities (see **Sponsorship Opportunities**)
3. Contact information (see **Sponsorship Opportunities**)

Exhibiting Pricing - There is a \$100 discount on exhibit space if both the Annual and Fall seminars exhibit spaces are purchased prior to the Annual Seminar, plus members can save an additional \$100!! SIGN UP FOR MEMBERSHIP AT [WWW.OSHP.ORG](http://WWW.OSHP.ORG) TO GET YOUR DISCOUNTS. (see **Grant and Sponsorship Program and Exhibitor Prospectus**)

This kit is supplied with this letter early in the year to allow sponsors to budget for potential sponsorship opportunities that will be available throughout the year. This kit will also be available on the OSHP website at [www.oshp.org](http://www.oshp.org), along with an online membership application.

The sponsorship level for a company is determined by the total value of sponsorship provided to OSHP during the previous calendar year and recognized the following calendar year. All sponsorships as defined in the Grant and Sponsorship Program will be included in the sponsorship calculation.

OSHP is a non-profit organization. The Tax ID # for OSHP is 23-7025546.

Again, thank you for your support! We look forward to continuing a relationship that is mutually rewarding and beneficial.

Sincerely,

Kathleen Stoner, PharmD  
OSHP President

### Oregon Society of Health-System Pharmacists

147 SE 102nd Avenue  
Portland, Oregon 97216

Phone: 503.255.2973  
Fax: 503.253.9172  
E-mail: [mail@oshp.org](mailto:mail@oshp.org)  
Web: [www.oshp.org](http://www.oshp.org)



**OSHP's mission is to advocate excellence in pharmacy practice. We strive to achieve this by supporting our members through educational opportunities promoting safe, efficacious and optimal drug therapy; provision of a forum for exchange of ideas and opportunities; and interpretation and development of legislation relating to pharmacy practice standards.**



# 2009 OSHP EVENT EXHIBITOR PROSPECTUS

## 2009 Annual Seminar

**April 24 – 26, 2009 – Salishan Spa & Golf Resort, Gleneden Beach, OR**

## 2009 Fall Seminar

**November 7, 2009 – Embassy Suites Portland Airport Hotel, Portland, OR**

### WHAT IS OSHP?

The Oregon Society of Health-System Pharmacists is a professional pharmacy organization which advocates excellence in pharmacy practice.

### WHO WILL ATTEND?

Attendees consist of practicing pharmacists, pharmacy technicians, pharmacy residents, pharmacy students and pharmaceutical representatives. Attendees work in diverse practice settings including hospitals, home infusion, long term care, ambulatory care clinics, and retail pharmacies.

### WHY SHOULD YOU EXHIBIT AT THE 2009 OSHP ANNUAL & FALL SEMINARS?

- A cost effective way to make new contacts
- Expanded professional contacts
- A focused audience
- Dedicated exhibit hours coupled with meal functions to increase exposure
- A listing in the on-site materials
- A listing in the OSHP newsletter, *Interactions*, post event
- An attendee list from the registered event

### WHEN WILL THE EXHIBITS BE HELD?\*

#### Annual Seminar

Set-up:	Friday 4/24/09	5:00-6:00 pm
Exhibit Hours:	Friday 4/24/09	6:00-8:00 pm
	Saturday 4/25/09	7:30 am-1:30 pm (scattered)

*NOTE: Exhibits will be open during the Welcome Event. Set-up will not be allowed after 6:00 pm.*

Tear Down:	Saturday 4/25/09	1:30-5:00 pm
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#### Fall Seminar

Set-up:	Saturday 11/7/09	6:30 – 7:30 am
Exhibit Hours:	Saturday 11/7/09	7:30 am – 1:30 pm (scattered)
Tear Down & Vacate:	Saturday 11/7/09	1:30-3:00 pm

*\*Subject to change-finalized schedule/times be provided a minimum of 30 days prior to the event.*

### WHERE ARE THE EVENTS BEING HELD?

Activities of the 2009 OSHP Annual Seminar are being held at the Salishan Spa & Golf Resort in Gleneden Beach on the Oregon Coast. The 2009 OSHP Fall Seminar will be held at the Embassy Suites Portland Airport in Portland, Oregon.

### WHAT DO YOU NEED TO EXHIBIT?

Your OSHP exhibit includes exhibit only registration for up to two company representatives, a skirted table and two chairs. One Saturday lunch ticket is per exhibit; however, additional tickets can be purchased on the registration form. Electricity will be available at your exhibit at an additional charge by request prior to the Annual and Fall Seminars. Space is limited – so register early. Exhibit space will be sold on a first-come, first-served basis.

**Cancellation Policy:** Annual Seminar exhibit cancellations received prior to March 24, 2009 will receive a 50% refund. Annual Seminar exhibit cancellations received after March 24, 2009 or no-shows will not receive a refund. Fall Seminar exhibit cancellations received prior to October 5, 2009 will receive a 50% refund. Fall Seminar exhibit cancellations received after October 5, 2009 or no-shows will not receive a refund. Discounts will be reversed as appropriate for exhibit and representative cancellations.

*Note: Exhibit Only Registration includes one Saturday lunch per exhibit. It does not include attendance at the educational offerings or materials. Seminar registrations or meals can be purchased for an additional cost.*

**Please complete the agreement and mail or fax with payment to:**

OSHP, 147 SE 102nd Avenue, Portland, OR 97216 Fax: 503.253.9172

# 2009 OSHP SPONSORSHIP OPPORTUNITIES

*Subject to Change*

## Annual Seminar

- **Date:** April 24-26, 2009
- **Location:** Salishan Spa & Golf Resort, Gleneden Beach, OR
- **Sponsorship:** General support of Seminar: \$2,000-\$5,000 / Sponsorship of breakfast, break, lunch, and dinner \$500-\$2,500
- **Contacts:**
  - Jennifer Jordan: jennifer.jordan@pacificu.edu
  - Deanna Moretz: deanna.moretz@safeway.com
  - Gerry Migaki: gerry.migaki@providence.org

## Fall Seminar

- **Date:** November 7, 2009
- **Location:** Embassy Suites Portland Airport Hotel, Portland, OR
- **Sponsorship:** General support of Seminar: \$1,500-\$3,000 / Sponsorship of breakfast, break, and lunch: \$500-\$1,500
- **Contacts:**
  - Ty Vo: tyvo@pacificu.edu
  - Harleen Singh: singhh@ohsu.edu
  - Deanna Moretz: Deanna.Moretz@safeway.com

## Statewide Chapter Meetings

### Northern Chapter Meetings

- **Scheduled Dates:** Various
- **Location:** North of Albany
- **Sponsorship:** \$5,000-\$10,000 (includes speaker costs and meeting dinner)
- **Contacts:**
  - Heather Miller: heather.miller@providence.org
  - Elena Valcarlos: evalcarlos@lhs.org

### Southern Chapter Meetings

- **Scheduled Dates:** Various
- **Location:** South of Albany
- **Sponsorship:** \$2,500-\$6,000 (includes speaker costs and meeting dinner)
- **Contacts:**
  - Cory Rahn: crahn@samhealth.org
  - Jarrod Brubaker: jbrubaker@peacehealth.org

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**See reverse side for 2009 Grant & Sponsorship Program**



## 2009 OSHP Grant and Sponsorship Program

Type of Sponsorship	GOLD SPONSORSHIP	SILVER SPONSORSHIP	BRONZE SPONSORSHIP
Level of Sponsorship	\$10,000*	\$5,000*	\$2,500*
OSHP Benefits of Sponsorship Levels	<ol style="list-style-type: none"> <li>1. Name badges acknowledging Gold Sponsorship at the Annual and Fall Seminars.</li> <li>2. Acknowledgement of Gold Sponsorship in all newsletters.</li> <li>3. Recognition posted on OSHP website and in Seminar materials.</li> <li>4. Invitation to reception honoring all Gold sponsors.</li> </ol>	<ol style="list-style-type: none"> <li>1. Name badges acknowledging Silver Sponsorship at the Annual and Fall Seminars.</li> <li>2. Acknowledgement of Silver sponsorship in all newsletters.</li> <li>3. Recognition posted on OSHP website and in Seminar materials.</li> </ol>	<ol style="list-style-type: none"> <li>1. Name badges acknowledging Bronze Sponsorship at the Annual and Fall Seminars.</li> <li>2. Acknowledgement of Bronze sponsorship in all newsletters.</li> <li>3. Recognition posted on OSHP website and in Seminar materials.</li> </ol>

### **\*Level of Sponsorship**

Calculation of sponsorship levels will be determined at the end of the calendar year and applied to the following year. Dollar amount calculation is based on dollar value of educational grants, cost of sponsorship (honorarium and travel costs) of a speaker for the Annual and/or Fall Seminars, cost of dinner, lunch or break for Annual and/or Fall Seminar, \$5000 for sponsorship of a Northern Chapter meeting, and \$2500 for sponsorship of a Southern Chapter Meeting. Any other sponsorship dollar value outside of the above will be determined by the Board of Directors.

### **Exhibit Space**

The cost for exhibit space at the OSHP Annual Seminar is \$1000 and Fall Seminar is \$850, which includes exhibit space and up to 2 representatives. Companies with more than two representatives must purchase a separate exhibit space for each two additional representatives that would like to display. If an exhibiting representative is a member of OSHP, there will be a \$100 discount. One lunch ticket will be included with each exhibit space; however, additional tickets can be purchased. CE will not be provided unless the representative has registered for the seminar as an official attendee.

**Oregon Society of Health-System Pharmacists**  
**2009 EXHIBIT SPACE & SEMINAR SPONSORSHIP AGREEMENT**

Company Name (exactly as it should be listed for Seminar purposes) \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Will you need electricity at your booth – At an additional charge?      Yes      No

Exhibiting Representatives (Names must be provided in order to take advantage of the Member Discount)

**Annual Seminar:** \_\_\_\_\_

**Fall Seminar:** \_\_\_\_\_

**PRICING:**

**Exhibits**

- |   |  |
|---|--|
| <input type="checkbox"/> Exhibit Space at Annual Seminar        | \$1000   |
| <input type="checkbox"/> Exhibit Space at Fall Seminar          | \$850  |
| <input type="checkbox"/> Exhibit Space at Annual & Fall Seminar | \$1750 * <i>To receive this discounted rate, you must register for both exhibit opportunities at one time.</i> |

Member Discount  
\$100 discount *per seminar* can be used when at least one \_\_\_\_\_ @ \$100 each exhibiting representative is a member of OSHP.

**Annual Seminar Sponsorships**

- |   |                          |
|---|--------------------------|
| <input type="checkbox"/> Friday Break                   | \$500                    |
| <input type="checkbox"/> Saturday Continental Breakfast | \$1500                   |
| <input type="checkbox"/> Saturday Lunch                 | \$2000                   |
| <input type="checkbox"/> Saturday AM & PM Breaks        | \$1000                   |
| <input type="checkbox"/> Saturday Dinner                | \$2500                   |
| <input type="checkbox"/> Sunday Breakfast               | \$1750                   |
| <input type="checkbox"/> Educational Grant              | \$ _____                 |
| <input type="checkbox"/> Silent Auction Item            | Contact OSHP for Details |

**Fall Seminar Sponsorships**

- |   |          |
|---|----------|
| <input type="checkbox"/> Saturday Continental Breakfast | \$1000   |
| <input type="checkbox"/> Saturday AM & PM Breaks        | \$500    |
| <input type="checkbox"/> Saturday Lunch                 | \$1250   |
| <input type="checkbox"/> Educational Grant              | \$ _____ |

**Total Amount Due \$** \_\_\_\_\_

**PAYMENT OPTIONS** (in US funds):  Check, Payable to OSHP     Visa/MasterCard     American Express

Is this a corporate card?  Yes  No    If so, company code \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Card Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Return form to:**

**OSHP \* 147 SE 102<sup>nd</sup> Ave., Portland, OR 97216 \* OSHP Tax ID #23-7025546**