

**Alabama Society for Healthcare Materiel Management**  
**500 North East Boulevard**  
**Montgomery, AL 36117**  
**(800)489-2542**

To: Past Sponsors and Potential Sponsors

From: Craig Davis, President, ASHMM

RE: 2023 ASHMM Annual Meeting  
Orange Beach, Alabama  
October 17-20, 2023

The Alabama Society for Healthcare Materiel Management's annual conference will be held October 17-20, 2023, at the Perdido Beach Resort in Orange Beach, Alabama.

Our conference provides a wide variety of networking opportunities for health care supply chain leaders and vendor representatives, all while learning about the latest trending topics in health care. With our limited time and busy schedules, this meeting allows for a more relaxed atmosphere for both parties to communicate. You will have the option to sit in on all speaker presentations and breakout sessions, join us for meals, participate in our Vendor Expo, as well as see and speak to supply chain leaders from across the state of Alabama.

The Vendor Expo will be held this year on Wednesday, October 18<sup>th</sup> from 3-5:30pm at the Perdido Beach Resort. Setup for the Expo will be from 9am – 12pm on this date. We also have many events available for sponsorship such as meals, golfing and fishing. Please review the attached Sponsorship incentives thoroughly and feel free to contact us with any questions. Vendors are welcome to co-sponsor events including exhibit booths with other vendors. Those unable to attend are encouraged to maintain a presence at this year's conference by sending contributions, donating door prizes or both. We appreciate any type of vendor support, and we will acknowledge those doing so throughout our meeting.

In the meantime, as you meet with providers in your territories, please consider asking if they are a member of the Alabama Society for Healthcare Materiel Management and if they have a designee that regularly attends the annual conference. An incentive will be provided for suppliers that are listed as the referral source for new members (additional details included with the vendor registration form). With your help and support we can grow our attendees and find additional ways to provide value back to our members.

We hope to see you at this year's ASHMM conference.

Enclosure: Vendor Registration Form and Sponsor Profile Form

**ALABAMA SOCIETY FOR HEALTHCARE MATERIEL MANAGEMENT**  
**Vendor Registration Form for Annual Meeting**  
**October 17-20, 2023**

Listed below are the fees and what is included with each option.

**OPTION A**

Booth Fee \$1,500 \_\_\_\_\_

Includes (1) Standard 6-foot Table Display during Vendor Expo on 10/18/2023 from 3 – 5:30 pm

Includes the following meals:

Reception 10/17/2023

Lunch 10/18/2023

Dinner 10/18/2023

Lunch 10/19/2023

Includes golf or fishing on 10/19/2023.

Access to meetings on all days except: ASHMM Members only business meeting on 10/20/2023

**4 Representatives/Guests per exhibiting company with access to events listed above.**

**OPTION B**

Attend with No Booth (limit 2 representatives) \$500 \_\_\_\_\_

Additional representative \$250 \_\_\_\_\_

**(Add up to 2 additional representatives for a total of 4)**

**Excludes** access to the Vendor Fair on 10/18/2023.

Includes the following meals:

Reception 10/17/2023

Lunch 10/18/2023

Dinner 10/18/2023

Lunch 10/19/2023

Includes golf or fishing on 10/19/2023.

Access to meetings on all days except: ASHMM Members only business meeting on 10/20/2023.

We have a sponsor incentive for our suppliers that promote ASHMM.

If a provider lists you as the referral source for joining ASHMM as a new member, you will receive **\$50 off your booth fee** for the conference. A max of **\$200** (4 referrals) will be allowed per supplier.

We will also be awarding a prize for the “Best Vendor Booth”. Criteria for the award will be:

- *Best use of color*
- *Most informative*
- *Most creative*
- *Best samples provided*

**Winning vendor will receive a voucher for a no charge “Vendor Booth” for the 2024 conference.**

**ALABAMA SOCIETY FOR HEALTHCARE MATERIEL MANAGEMENT**  
**Vendor Registration Form for Annual Meeting**  
**October 17-20, 2023**

Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Please list attendees:**

**(Indicate whether you would like to play golf or fish on Thursday afternoon)**

	<b>Golf</b>	<b>Fish</b>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**Make checks payable to the Alabama Society for Healthcare Materiel Management (ASHMM).**

<input type="checkbox"/> Check enclosed in the amount of \$ _____ Check Number: _____
<input type="checkbox"/> AMEX/VISA/Mastercard: Card # _____ ID # ____ (required)
Exp. Date: _____
Signature: _____ Date: _____

**Mail vendor registration form and check to:**

**Debbie Stuckey, AlaHA**  
**500 North East Boulevard**  
**Montgomery, AL 36117**  
**Phone Number 800-489-2542**  
**Email [dstuckey@alaha.org](mailto:dstuckey@alaha.org)**

## ADDITIONAL SUPPORT OPPORTUNITIES

This fee is in addition to the exhibit cost. Sponsorship incentives have changed this year so please review the following breakdown carefully.

Bronze	\$1,000
Silver	\$2,500
Gold	\$4,000
Platinum	\$8,000

Event	Amount	Category	Sponsorship Package Includes:
Member Scholarship (x10) Wednesday's Snack Break	\$1,000	<b>Bronze</b>	Logo included in conference materials & communication Vendor badge designation of sponsorship level Table topper acknowledging sponsorship level at vendor expo Acknowledgement/Recognition for the event being sponsored
Wednesday's Vendor Expo Snacks/Bar Wednesday's Banquet Set Up Technical Audio/Sound Set Up Thursday's Golf Outing Tuesday's Welcome Reception - Bar Thursday's Box Lunch	\$2,500	<b>Silver</b>	Logo included in conference materials & communication Vendor badge designation of sponsorship level Table topper acknowledging sponsorship level at vendor expo Acknowledgement/Recognition for the event being sponsored 1-Hour early access to vendor expo for booth selection and setup Entry into a drawing for 1 Free Vendor Booth (2024 Conference) <i>*\$1,500 value*</i>
Tuesday's Welcome Reception - Food Wednesday's Banquet Dinner - Bar Thursday's Fishing Outing	\$4,000	<b>Gold</b>	Logo included in conference materials & communication Vendor badge designation of sponsorship level Table topper acknowledging sponsorship level at vendor expo Acknowledgement/Recognition for the event being sponsored 1-Hour early access to vendor expo for booth selection and setup Entry into a drawing for 1 Free Vendor Booth (2024 Conference) <i>*\$1,500 value*</i> 15 Minute Vendor Presentation (Wednesday, Oct. 18th)
Wednesday's Lunch Buffet Wednesday's Banquet Dinner - Food	\$8,000	<b>Platinum</b>	Logo included in conference materials & communication Vendor badge designation of sponsorship level Table topper acknowledging sponsorship level at vendor expo Acknowledgement/Recognition for the event being sponsored 1-Hour early access to vendor expo for booth selection and setup Free Vendor Booth Registration for 2023 Conference <i>*\$1,500 value*</i> Entry into a drawing for 1 Free Vendor Booth (2024 Conference) <i>*\$1,500 value*</i> 30 Minute Vendor Presentation (Wednesday, Oct. 18th)

**ALABAMA SOCIETY FOR HEALTHCARE MATERIEL MANAGEMENT**  
**Sponsor Profile Form for Annual Meeting**  
**October 17-20, 2023**

**Company** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Please indicate your desired Sponsorship Package:**

- Bronze                    \$1,000
- Silver                     \$2,500
- Gold                        \$4,000
- Platinum                  \$8,000

**If you have a preference on the Conference Event you would like to sponsor for your designated package level, please list these below. Events will be assigned in the order that Sponsorships are received.**

**Sponsorship Event – 1<sup>st</sup> Choice** \_\_\_\_\_

**Sponsorship Event – 2<sup>nd</sup> Choice** \_\_\_\_\_

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<input type="checkbox"/> Check enclosed in the amount of \$ _____                      Check Number: _____
<input type="checkbox"/> AMEX/VISA/Mastercard: Card # _____                      ID # ____ (required)
Exp. Date: _____
Signature: _____                      Date: _____

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