

# ADVERTISER APPLICATION

Please complete all four sections and return this form with payment by March 1, 2019

Company Name \_\_\_\_\_ Contact Person \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

CONFERENCE PROGRAM AD TYPE	DIMENSIONS	EXHIBITOR COST	NON-EXHIBITOR COST	QUANTITY	AMOUNT DUE
Full Page	8 1/2" x 11"	\$1,500	\$1,700		
1/2 Page	8 1/2" x 5 1/2"	\$800	\$1,000		
1/4 Page	4 1/4" x 5 1/2"	\$500	\$600		
Inside Back Cover	8 1/2" x 11"	\$1,800	\$2,000		
Inside Front Cover	8 1/2" x 11"	\$2,000	\$2,200		
Add Four-Color Process		+\$650	+\$650		
<b>SUPPORTER SUPPLEMENT AD TYPE</b>					
Full Page	8 1/2" x 5 1/2"	\$600	\$800		
Inside Back Cover	8 1/2" x 5 1/2"	\$1,600	\$1,800		
Inside Front Cover	8 1/2" x 5 1/2"	\$1,800	\$2,000		
Add Four-Color Process		+\$450	+\$450		
<b>COMMERCIAL &amp; NON-COMMERICAL</b>					
Bag Insert*		\$1,500	\$1,800		

Payment in the amount of \$\_\_\_\_\_ will be submitted by Check or Credit Card (Please circle one):

**A check is enclosed** (payable to "ACTHIV").  **Please charge my:**  American Express  MasterCard  VISA

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address of Card: \_\_\_\_\_

Support Terms: Each advertising company must email their logo in both EPS and JPG format to Debbie.Cooke@meetingmasters.biz for inclusion in the Conference Program or Supporter Supplement. All of the above opportunities are exclusively reserved for ACTHIV advertisers.

*Please read the attached Terms & Conditions and sign below.*

I am an authorized representative of the company named above with the full power and authority to sign and deliver this application. I further acknowledge that ACTHIV reserves the right, in its absolute discretion, to reject this application. This application shall not become a binding contract until fully executed by both parties (the advertiser and the conference).

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Send this completed form with payment to:** ACTHIV, Attn: Debbie Cooke,  
15 Tally Ho Drive, Fredericksburg, VA 22405 • Phone (540) 368-1739 Debbie.Cooke@meetingmasters.biz

ACTHIV April 11 - April 13, 2019 Miami Hilton Downtown, Miami, FL  
(540) 368-1739 Debbie.Cooke@meetingmasters.biz www.ACTHIV.org