

ADVERTISING OPPORTUNITIES

Advertising for **NON-COMMERCIAL** organizations in the ACTHIV Conference Program will be distributed to all conference attendees, speakers and exhibitors. The Conference Program will contain information about the conference exhibitors, oral and poster presentations, social events, symposia, CME/CE credit and other information. It serves as the resource for all information about the conference and is used as a tool throughout the year by our attendees.

Advertising for **COMMERCIAL** organizations in the ACTHIV Supporter Supplement will be distributed to all conference attendees, speakers and exhibitors.

To advertise your product or service, return your completed advertising contract to ACTHIV by March 1, 2019.

All ads should be sent in a PDF or JPEG format to Debbie.Cooke@meetingmasters.biz. All ad copy and logos must be turned in to ACTHIV by March 5, 2019 for inclusion in conference program.

***Bag insert program:** bag inserts need to be reserved by March 5, 2019. If inserts are received late, they will not be placed in the attendee bags, but will be available for pick-up at the registration area. No refunds will be given.

CONFERENCE PROGRAM AD TYPE	DIMENSIONS	EXHIBITOR COST	NON-EXHIBITOR COST
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
SUPPORTER SUPPLEMENT AD TYPE			
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
COMMERCIAL & NON-COMMERICAL			
Bag Insert*		\$1,500	\$1,800

APPLICATION

Application for space in the Conference Program or Supporter Supplement must be made in writing on the advertising application form included in this document.

Application form must be returned to ACTHIV by March 1, 2019.

Applications will be reviewed, considered and approved by the ACTHIV Program Committee. All applicants will be notified in writing via email about the status of the application.

Please forward your application to:

Debbie Cooke

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

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		
SUPPORTER SUPPLEMENT AD TYPE					
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		
COMMERCIAL & NON-COMMERICAL					
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

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