



Please contact Kristina Bell (Kristina.bell@provena.org) (815) 725-7133 xt. 5692) or Lee Remen (lremen@healthwaresystems.com) (815) 725-7133 xt. 5692) to confirm there is still space available.

DETAILS:

When: October 1, 2009

Where: Dave & Busters 1030 North Clark St, Chicago, IL 312-943-5151

Who: up to 30 Vendors and up to 200 Healthcare Providers from Illinois and other states

Why: Educational sessions and personal contacts between providers and vendors

Type of participation:

<u>Description</u>	<u>Cost</u>	<u>#</u>	<u>Total</u>
<u>Table top booth at "Pay To Play" (includes full conference, lunch and reception for 1 company representatives)</u>	<u>\$350.00</u>	<u>1</u>	<u>\$350.00</u>
<u>Additional Company Representative (1 Discounted Per Vendor Table)</u>	<u>\$90.00/Each</u>		
<u>Additional Company Representative (Regular Attendee Cost)</u>	<u>125.00/Each</u>		
<u>Additional Sponsorship opportunities</u>			
<u>Breakfast Sponsor (multiple)</u>	<u>\$250.00</u>		
<u>Lunch Sponsor (multiple)</u>	<u>\$500.00</u>		
<u>Cocktail Reception Sponsor (only 1)</u>	<u>\$750.00</u>		
		TOTAL	

Please List Participates

Participant 1 (included) Name _____

Participant 2 (Add'l Fee) Name _____

Participant 3 (Add'l Fee) Name _____

Participant 3 (Add'l Fee) Name _____

Payment must then be received by September 17 to confirm your spot.

Participating Organization:

Primary Contact: _____ Company: _____

Address: _____ Phone: _____

Fax: _____ Email: _____

Website: _____

We would be interested in providing a raffle prize please contact:

Name: _____ Email: _____ Phone: _____

Checks should made payable to "AIPAM" and sent with this form to:

Lee Remen Healthcare Systems, 2511 Technology Drive, Suite 102, Elgin, IL 60123

Questions, contact: Kristina Bell (Kristina.bell@provena.org) (815) 725-7133 xt. 5692)