AAPS 99th Annual Meeting
May 15-18, 2021 ♦ JW Marriott Turnberry
Miami, Florida

Complete and return to:
AAPS- Yvonne Grunebaum
500 Cummings Center, Suite 4400,
Beverly, MA 01915 USA
Phone: 978-927-8330 / Fax: 978-524-0461
ygrunebaum@prri.com

SANITATION/PPE SUPPORT AGREEMENT FORM

_____
Supporter

_____
Contact Title

_____
Address

_____
City/State/ Zip/Country

_____
Telephone Fax Email

☐ Sanitation Kit - $5,000
☐ Branded Personal Wipes - $2,100
☐ Branded Face Coverings - $3,000
☐ Branded Hand Sanitizer - $2,400
☐ Branded Social Distancing Signs - $2,500

Support will be recognized on the AAPS website and on signage at the meeting.

PAYMENT METHOD
☐ **Check Amount Enclosed**: $_____

Credit Card ☐ American Express ☐ MasterCard ☐ Visa Amount to be charged: $_____

Card Number: _____ Expiration Date: _____ Sec Code: _____
(3-4 #s on back of card)

_____ _____
Name as it appears on the card Cardholder's Signature

❑ Please check if credit card billing address is same as contact information at the top of the form.
❑ If billing address is not the same please enter below.

Secure Fax: + 978.524.0461 **This form must be faxed if credit card number is showing. DO NOT EMAIL.**

_____ _____ _____
Company Name Street Address City/State/Postal Code /Country

WE AGREE TO ABIDE BY ALL RULES AND REGULATIONS SET FORTH IN THE PROSPECTUS. ACCEPTANCE OF THIS APPLICATION BY SHOW MANAGEMENT CONSTITUTES A CONTRACT.

_____ _____ _____
AUTHORIZED SIGNATURE **PRINT NAME** **TITLE**