

2010 SOUTH CENTRAL ASSOCIATION OF BLOOD BANKS EXHIBITOR & SPONSORSHIP PROSPECTUS DETAIL

South Central Association of Blood Banks is "On a Mission" to bring together blood banking and transfusion medicine professionals for the purpose of education, networking and exploring the latest and greatest tools, technology and resources available to the industry!! You won't want to miss this opportunity to meet with the decision makers of our industry in an educational format.

Below are the details on all sponsor, exhibiting and advertising opportunities available to you and your company through the 2010 Annual Meeting & Exhibit Show. Custom sponsor programs can be created to assist you and your company in staying within specific marketing parameters. Contact us at 866-649-6550 to discuss.

EXHIBIT SHOW

The 2010 Exhibit Hall of the South Central Annual Meeting will be held at The Crowne Plaza Hotel in San Antonio. All levels of professionals within the blood banking industry will attend, including key decision makers. The South Central Annual Meeting continues to remain an outstanding forum to meet new prospects and network with existing clients.

A 10'x10' exhibit booth space in the Fiesta Pavillion of the The Crowne Plaza in San Antonio includes 8' draped/skirted table. The exhibit hall is fully carpeted.

COST: \$1,200.00 (1 booth) \$900.00 (2nd Booth)

SPONSORSHIP OPPORTUNITIES

Sponsorship opportunities have been designed for the 2010 Annual Meeting to streamline fundraising for the Association and provide the maximum return on investment for our sponsors. Details of these opportunities and their benefits are outlined in the chart below. Note: companies sponsoring at the President's Circle and Benefactor levels, receive a significant discount on Attendee Marketing promotion sponsorships.

<u>SPONSORSHIP BENEFITS</u>	President's Circle \$10,000	Benefactor \$7,500	Sponsor \$5,000	Friend \$2,500	Supporter \$1,000
Recognition from podium by a South Central Board member during the Annual Meeting	x	x			
A full page, 2 color advertisement in the Annual Meeting Final Program	x	x			
In-Booth Identification for level of sponsorship	x	x	x	x	x
Complimentary Industry Workshop on Thursday, March 18th - a \$1,000 value.	x				
Priority placement on the major meeting signage throughout the annual meeting Hotel for level of sponsorship	x	x			
Listing on meeting signage at the hotel			x	x	x
Pre and Post meeting registration mailing lists	x	x	x	x	
Annual subscription to Pulse	x	x	x	x	x
A half page, 2 color advertisement- Annual Meeting Final Program			x		
A business card size advertisement- Annual Meeting Final Program				x	
<u>ADDITIONAL MARKETING OPPORTUNITIES</u>					
Delegate Gift (\$5,000)	\$2,500	\$2,500	\$5,000	\$5,000	\$5,000
Lanyards (\$2,000)	\$1,000	\$1,000	\$2,000	\$2,000	\$2,000
Cyber Café (\$5,000)	\$2,500	\$2,500	\$5,000	\$5,000	\$5,000
New Member/First Time Attendee Luncheon (\$2,500)	\$1,250	\$1,250	\$2,500	\$2,500	\$2,500
Great Idea Board (\$1,000.00)	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Coffee & Beverage Breaks (\$2,500.00)	\$1,250	\$1,250	\$2,500	\$2,500	\$2,500
Opening Reception/Welcome Mixer (\$5,000)	\$2,500	\$2,500	\$5,000	\$5,000	\$5,000

Note: Sponsors at the President's Circle and Benefactor, will receive a 50% discount on Additional Marketing Opportunities - Limit One.

INDUSTRY WORKSHOPS

Industry Workshops are intended to educate South Central Annual Meeting attendees on subjects such as a customer implementation of new products or technical presentations on new methods or products. The sessions must be educational in nature and should not be used as a sales or marketing opportunity. Industry Workshops are a unique way to contribute to the overall value of South Central's educational programs and increase awareness of your company's resources and service offerings.

Selection criteria for all workshops include educational content, relevance, duplication with scheduled SCABB sessions and application date. SCABB Sponsors at the President's Circle Level will be given priority and the workshop fee will be waived for workshops that meet the content criteria. South Central will provide publication of the title, faculty, educational objectives and event description of the workshop in the Final Program; meeting space for 50 -70 attendees set for capacity attendance. The presenting company is responsible for AV equipment beyond a podium and microphone. Projectors, screens and high-speed Internet lines will not be covered by the workshop fee and are the financial responsibility of the presenting company. Food and beverage service is also the responsibility of the presenting company.

Industry Workshop Requirements:

- Under most circumstances, it is expected that the workshop provider will be an exhibitor at SCABB 2010.
- Companies can submit applications for multiple workshops; however, only one application will be accepted for presentation unless additional space is available (space limitations require this restriction). Each workshop fee is \$1,000.
- Applications must be submitted by December 1, 2009. Applications will be accepted on a first-come, first-served basis.
- Workshops approved are to be held on Thursday, March 18th only.

Cost: \$1,000.00

Payment in the full amount must accompany your application (if your workshop is not approved, your payment will be refunded). No fee is required for President's Circle sponsors.

FINAL PROGRAM ADVERTISING

Advertising in the Annual Meeting program is included with most Sponsor packages, however, if a sponsor wishes to upgrade to a larger ad, ad rates are as follows:

<u>AD SIZE</u>	
1/4 Page (7.5"x4.625")	\$225
Full Page Inside	\$275
Inside Front Cover	\$750
Full Page Back Cover	\$750

PULSE NEWSLETTER ADVERTISING

Pulse distribution is to over 350 South Central members covering 9 states (CO, MS, AR, LA, AZ, OK, NM, TX and NV). The individual members of the association are healthcare workers such as medical technologists, nurses, physicians, administrators, donor recruiters, phlebotomists, and industry representatives interested in the field of transfusion medicine. The institutional members are hospitals, blood donor centers, and blood testing centers. It is anticipated that the readership of Pulse is approximately 1,200 and growing! The Advertising Rate card is below.

You have the option of supplying a new ad for each issue (no additional cost) or keeping the same one all year. **Note:** The Publications Committee for South Central has the right to review and refuse any advertisement if it is not in keeping with the Mission of the association.

<u>AD SIZE</u>	<u>1 ISSUE</u>	<u>2 ISSUES</u>	<u>3 ISSUES</u>	<u>4 ISSUES</u>
1/2 Page (7.5"x4.625")	\$225	\$200 ea issue	\$175 ea issue	\$150 ea issue
1/2 Page Back Cover (7.5"x4.625")	\$275	\$250 ea issue	\$225 ea issue	\$200 ea issue
1/4 Page (3.625x4.625")	\$150	\$125 ea issue	\$100 ea issue	\$75 ea issue

Example: 1 Ad, 2 Issues, 1/2 Page= \$400.00

Ads must be emailable (to scabb@scabb.org). All artwork must be camera ready in jpg or eps format.

Ad space is limited to one ad per company per issue.

Publishing Schedule:

<u>Submission Deadline</u>	<u>Distribution Target</u>	<u>Issue</u>
Nov 15, 2009	mid-December	Nov/Dec/Jan
Feb 28, 2010	mid – March	Feb/Mar/Apr (Annual Meeting Issue)
May 15, 2010	mid – June	May/June/July

A limited amount of space is dedicated for Advertising in Pulse. Advertising Space will be made available on a first-come, first-served basis and is limited to one ad, per issue, per vendor/company.

**SOUTH CENTRAL ASSOCIATION OF BLOOD BANKS
EXHIBITOR & SPONSORSHIP AGREEMENT FORM**

In the providing of the information below you agree to all Terms and Conditions detailed in the Exhibitor/Sponsorship Prospectus for the 2010 Annual Meeting in San Antonio, Texas.

*Company Name _____
(exactly as it is to be printed on sign)

*Address _____ City _____ ST _____ Zip _____

Phone (_____) _____ Ext: _____ Fax (_____) _____

Web Address/URL: _____

*Representative responsible for making arrangements for this show _____

*Phone (_____) _____ *Email _____

*Principal Representative attending show _____

*Phone (_____) _____ *Email _____

* Indicates REQUIRED fields.

Complete the information requested below for the areas of Exhibit/Sponsorship in which your company will be participating.
Sponsorship Opportunities - Please mark the box on the left for your level of support:

"X"	SPONSORSHIP OPPORTUNITY	AMOUNT	"X"	OPPORTUNITIES CONTD.	AMOUNT
	President's Circle	\$10,000		Industry Workshop	
	Benefactor	\$7,500		Final Program Advertising Indicate page size	
	Sponsor	\$5,000		Pulse Advertising Indicate page size & frequency	
	Friend	\$2,500		PAYMENT DETAILS	
	Supporter	\$1,000		Sponsorship Amount	
	ADDITIONAL MARKETING OPPORTUNITIES			Total Additional Marketing Opportunities	\$
	Delegate Gift	\$5,000		Industry Workshop	
	Delegate Lanyards	\$2,000		Advertising Fee	
	Cyber Café	\$5,000		Total of ALL Sponsorship Opportunities	\$
	Great Idea Board	\$1,000			
	New Member/First Time Attendee Luncheon	\$2,500			
	Coffee & Beverage Breaks	\$2,500			
	Opening Reception / Welcome Mixer	\$5,000			
	<i>President & Benefactor Level Sponsors Apply 50% Discount</i>				
	Total Additional Marketing Opportunities				

EXHIBIT SHOW

- Yes, my company will be exhibiting at the 2010 South Central Annual Meeting.
- Yes, my company will be exhibiting at the 2010 South Central Annual Meeting and has already paid the Early Booth Placement deposit.

Number of booths required: _____ Single \$1,200 _____ Second \$900
 (For special rates for additional space contact trade show manager.)

Choice of booth(s) from layout in Prospectus 1st _____ 2nd _____ 3rd _____

Please list any Exhibitor you want to be located near: _____

Which companies do you NOT wish to be near? _____

Please provide a 35 word description of your company: _____

INDUSTRY WORKSHOP

- Yes, my company would like to present an Industry Workshop at the 2010 South Central Annual Meeting.
 - My Company is sponsoring at the President's Circle level and will be presenting an Industry Workshop at the 2010 South Central Annual Meeting.
 - My company is sponsoring at the President's Circle level and WILL NOT be presenting an Industry Workshop at the 2010 South Central Annual Meeting.
- Cost: \$1,000.00

PAYMENT METHOD

Check enclosed Please charge my MasterCard/Visa/American Express

Card # _____ Exp Date _____

Print Name (as it appears on charge card) _____

Signature of cardholder _____

Billing Address of card holder _____

Exhibit Fee \$ _____
 Sponsorship Total \$ _____
 Marketing/Advertising Fee \$ _____
 Industry Workshop Fee \$ _____
 Deposit Paid \$ _____
 Total Enclosed Or Authorized for Payment \$ _____

For South Central, Central Office Use Only: Date Received: _____ Check Number: _____ Amount: _____ CC Authorization #: _____ CC Processed Amount: _____

*Return via fax to South Central Association of Blood Banks, 866-649-6590 or
 USPS to 2901 Richmond Rd., Suite 130-176, Lexington, KY 40509*