

# Conference Registration Form

If you are using this form instead of online registration, please indicate what you would like to do.

## Transfer an Existing Registration

### ▶ Name Change Fee \$100

If you are replacing someone who has already registered for the conference, complete the "Attendee Registration Information" below with your own information and indicate the name of the person you are replacing here.

Name of person  
you are replacing: \_\_\_\_\_

You will also need to contact the Baltimore Marriott Waterfront to change your colleague's room reservation to your own name. See side two for hotel details.

## Register an Attendee

### ▶ Standard Registration - \$3,400

Please check your appropriate designation:

#### Pharmaceutical Industry Participant

Defined as an individual employed by a Pharma or Biotech company that manufactures and/or distributes pharmaceuticals, pharmaceutical samples and/or medical devices.

#### Exhibitor

Exhibitors must first purchase a Booth Registration Package which includes a 10' x 10' space and 2 conference exhibitor badges. **This form is to be used for additional exhibit staff who are not included in the booth package badges.**

### Attendee Registration Information

Name as you wish it to appear on Conference Badge:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Business Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Phone \_\_\_\_\_ Have you attended the conference before?  Yes  No

## Register a Spouse/Guest (NOT part of the Pharmaceutical Compliance Community)

### ▶ Conference Meals and Events Fee - \$350

You may bring a spouse/guest who is not part of the pharmaceutical/medical device/biotech compliance community. A guest is defined as a non-industry related person and may not be a member of your organization. **Please comply with this important distinction.**

Guest  
First Name: \_\_\_\_\_

Guest  
Last Name: \_\_\_\_\_

## Payment Options All registration fees are non-refundable, regardless of the circumstances.

### Action:

#### ▶ Transfer An Existing Registration:

Name Change Fee...\$100

#### ▶ Register An Attendee:

Standard Registration.....\$3,400

#### ▶ Register A Spouse/Guest:

Conference Meals and Events Fee.....\$350

### Type of Payment:

**Credit Card** If paying by credit card, email form to mail@sharingalliance.org or fax to 914-747-1430. You may also call 914-747-1400 if you prefer to give credit card info by phone.

Please indicate one  MasterCard  Visa  American Express

Credit Card Number \_\_\_\_\_

Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Signature \_\_\_\_\_

(or)

**Check** If you are paying by check, please make payable to: "PDMA Alliance Inc./dba The Sharing Alliance", Tax ID number 59-3589416 and mail the check and this completed form to:

Deb Segura, Alliance Executive Director, The Sharing Conference, 2490 Stewart Street, York, SC 29745

# Conference Registration Form

## Special Needs

Dietary  Vegetarian  Gluten Free  Allergies (please specify) \_\_\_\_\_

Other \_\_\_\_\_

Physical  Please check here if you require special accommodations and explain \_\_\_\_\_

Other \_\_\_\_\_

## Tee-Shirts

What size tee-shirt would you prefer in your Welcome Bag?  Small  Medium  Large  XL  XXL

## Emergency Contact

Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

## Hotel Room Block Information (separate from conference registration)

The Sharing Alliance™ has negotiated an excellent discounted room rate. We appreciate your support of the conference by staying at the Baltimore Marriott Waterfront.

- The room rate for the 2019 Sharing Conference™ is \$229<sup>00</sup> (plus state/local taxes)
- Reserve your room online through the conference website ([www.sharingalliance.org](http://www.sharingalliance.org)) or by calling 1-877-212-5752. When reserving your room by phone, you must reference group "2019 Sharing Conference/Sharing Alliance." This is necessary to obtain the discounted rate.
- Room block reservations must be made by Friday, August 30, 2019. After that date, rooms will be offered on a space available basis at prevailing hotel rates.

**If you have any questions about the conference registration or hotel, or if you would like to know more about registering 3 pharmaceutical/medical device/biotech professionals from the same company and adding 1 colleague at no additional cost, please email [mail@sharingalliance.org](mailto:mail@sharingalliance.org) or call 914-747-1400.**

All Sharing Conference participants are considered members of The Alliance and fall into either the Vendor Member or Industry Member category. Vendors are required to purchase an exhibit booth package to attend and participate in the 2019 Sharing Conference. Vendor Members may attend all Conference functions unless otherwise indicated. Vendor Members are defined as: any individual employed by a company that provides services supporting the Industry Member companies. Examples include (but are not limited to) sales and marketing support providers such as contract sales organizations, software/hardware providers, web-based services, validation services, logistics support, inventory and audit support, companies providing card or voucher based sampling support, paper processing/imaging, and any other company that does not meet the definition of an Industry Member. Industry Members are defined as: any individual employed by a pharmaceutical or biotech company that manufactures and distributes pharmaceuticals and/or medical devices.