

## 2024 AFFINITY GROUP SPONSORSHIP AGREEMENT

COMPANY INFORMATION					
Company Name					
Company Address					
City	State/Province	Zip/Postal Code	Country		
Company Telephone Website					
Company Type	<ul><li>□ Pharmaceuticals</li><li>□ Technology/Software</li><li>□ Consulting</li><li>□ Services</li></ul>	☐ Biotechnology ☐ Medical Device ☐ College/University ☐ Other	☐ Clinical Research☐ Diagnostics☐ Association/Non-Profit		
PRIMARY CON	NTACT INFORMATION*				
Name		Title			
Address					
City		State/Province			
Zip/Postal Code _		Country			
Direct Phone		Direct Fax			
Email Address					
DILL INC CONT	TACT INFORMATION **/:: 4:	Savant Suara minara a canta	-t.\		
BILLING CONTACT INFORMATION**(if different from primary contact)					
		Title			
Address					
City		State/Province			
Zip/Postal Code _		Country			
Direct Phone		Direct Fax			
Email Address					

<sup>\*</sup>The primary contact is the Point of Contact for all HBA matters and ensures that time-sensitive communications go to the correct person(s) within your organization.

<sup>\*\*</sup>The billing contact is the person authorized to sign and make payments on behalf of the sponsor's account.



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☐ Digital Innovators	☐ Patient Cent	ricity			
□ Voices of Tomorrow	es of Tomorrow				
Science	en of Color				
Sponsorship Packages					
☐ Inspire Exclusive (\$20,000)	☐ Engage Non-Exclusive (\$10,000)	☐ Connect Non-Exclusive (\$7,500)			
☐ Inspire Exclusive (\$24,000)	☐ Engage Non-Exclusive (\$12,000)	☐ Connect Non-Exclusive (\$9,000)			
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5	3	2			
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•					
	Happy hour sponsorship (1hour, 20 people max)				
•	(1,7,7)				
□ Non-Corporate Partner (\$18,000) □ Non-Corporate Partner (\$4,200)					
ole max) Casual ne	Casual networking at Annual Conference				
•	☐ Corporate Partner (\$1,000)				
	Voices of Tomorrow  Science	□ Voices of Tomorrow □ Women in Hoscience □ Women of Color    Sponsorship Packages □ Inspire □ Engage Non-Exclusive (\$20,000) □ Inspire □ Engage Non-Exclusive (\$12,000) □			



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Custom Sponsorship	
	Amount: \$
	authority to do so on behalf of your company. All sponsorships are es the right to change/modify all sponsorship opportunities. Payment is due

**1.APPLICATION AND ELIGIBILITY**. Sponsorships must be made on the form provided, contain the information requested, and be executed by an individual who has authority to act for the applicant (sponsor). The Association reserves the right to reject any application.

**Terms and Conditions** 

- **2.SPONSOR REPONSIBILITIES.** Sponsor shall be responsible for the following: a. All giveaways (virtual coupon, promotional codes, etc.) to be used during the sponsored function b. Any additional digital signage, banners, etc. to be displayed during the sponsored function.
- **3.PAYMENT TERMS**. Upon executed sponsorship agreement, payment is due in full.

upon execution of this agreement. Refer to the Terms & Conditions below.

- **4.PUBLICITY.** HBA shall publicize and promote the program and shall be permitted to use Sponsor's name and logo in connection with such publicity and promotion.
- **5.SPONSOR PUBLICITY.** Sponsor may publicize that it is a sponsor of this HBA Program. However, Sponsor acknowledges that HBA is the lawful owner of the names "Healthcare Businesswomen's Association, and the acronym "HBA," and any associated logos. Sponsor agrees to take no action inconsistent with HBA's ownership, or that would subject HBA to claims by third parties or potential loss of its ownership. Any uses of HBA's logo or event logo by the Sponsor must be approved, in advance, by HBA and follow HBA's branding guidelines.
- **6.TERMINATION.** If Sponsor breaches any of its obligations hereunder, HBA shall have the right to terminate this agreement and to retain Sponsor's sponsorship fee as liquidated damages (and not as a penalty), in addition to any other rights it may have at law or at equity.
- **7.INDEMNIFICATION.** Sponsor agrees to indemnify and hold HBA harmless against any losses, claims, expenses or damages from its own negligent or willful acts or omissions of its employees, officers, directors, agents, contractors, or others acting on its behalf or with its authority.
- **8.TERMS.** The term of this Sponsorship Agreement shall commence upon execution of this Agreement and shall terminate upon conclusion of the program, unless sooner terminated pursuant to paragraph 6.
- **9.LIABILITY.** HBA shall have no liability with respect to its obligations under this Agreement for consequential, exemplary, special, indirect, incidental or punitive damages, even if it has been advised of the possibility of such damages. The liability of HBA for any reason and upon any cause of action or claim shall be limited to the fees paid by Sponsor to Healthcare Businesswomen's Association under this Agreement. This limitation applies to all causes of action or claims in the aggregate, but does not apply to death, bodily injury or damage to personal property caused by Healthcare Businesswomen's Association negligence.