

## SPONSOR INFORMATION

Organization Name (as you would like it to appear in Conference materials)

Mailing Address \_\_\_\_\_

City/ST/ZIP \_\_\_\_\_

Contact Person's Name/Title \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

## SPONSORSHIP OPPORTUNITY SELECTION

Thank you for considering a CAPG Healthcare Conference Sponsorship. Please review the benefits of each category and select the sponsorship of your choice. Then complete the following steps to reserve your place at the conference. We gratefully acknowledge our sponsors and their contributions.

### **DIAMOND SPONSOR \$30,000**

- Sponsorship of general session and/or breakout speaker plus opportunity to introduce speaker
- Preferential booth space at the Friday Night Exhibit Fair and Strolling Dinner, plus two Friday-night-only booth attendees
- Four complimentary Conference registrations with admission to all events (six registrations for CAPG Partners)
- One deluxe upgraded hotel room for Friday and Saturday nights
- Complimentary golf foursome at the Conference Golf Tournament
- Diamond Level sponsorship acknowledgment in Conference CD, meeting materials and *CAPG Update*
- Flag and premium signage featuring your corporate logo prominently displayed during the Conference
- Ten color slides of your logo displayed prior to general sessions
- Custom banner ad with website link on launch page of Conference CD
- Company name on Conference CD sleeve
- Upgraded listing—including logo web link and company information—in the Conference “Virtual Tradeshow”

### **PLATINUM SPONSOR \$20,000**

- Sponsorship of a breakout session with opportunity to introduce speaker
- Booth space at the Friday Night Exhibit Fair and Strolling Dinner, plus two Friday-night-only booth attendees
- Two complimentary Conference registrations with admission to all events (four registrations for CAPG Partners)
- Complimentary golf twosome at the Conference Golf Tournament
- Platinum Level sponsorship acknowledgment in Conference CD, meeting materials and *CAPG Update*
- Flag featuring your corporate logo, along with other top sponsors, prominently displayed during the Conference
- Eight color slides of your logo displayed prior to general sessions
- Logo with website link displayed on Platinum Sponsors banner ad of Conference CD
- Upgraded listing—including logo web link and company information—in the Conference “Virtual Tradeshow”

### **GOLD SPONSOR \$15,000**

- Booth space at the Friday Night Exhibit Fair and Strolling Dinner, plus two Friday-night-only booth attendees
- One complimentary Conference registration with admission to all events (two registrations for CAPG Partners)
- Gold Level sponsorship acknowledgment in Conference CD and *CAPG Update*
- Flag featuring your corporate logo, along with other top sponsors, prominently displayed during the Conference
- Four color slides of your logo displayed prior to general sessions
- Logo with website link displayed on Sponsors page of Conference CD
- Upgraded listing—including logo with web link and company information—in the Conference “Virtual Tradeshow”

### **CONTRIBUTING SPONSOR \$5,000 – \$10,000**

- Opportunity to sponsor Conference event(s) or materials: (Contact Rick Swanson at 213-239-5043 for details.)
- Logo displayed on Sponsors page of Conference CD

### **EXHIBITOR \$5,500 (\$4,500 for CAPG Partners)**

- One complimentary Conference registration
- Booth space at the Friday Night Exhibit Fair and Strolling Dinner, plus one Friday-night-only booth attendee
- Two color slides of your logo displayed prior to general sessions
- Logo displayed on Sponsors page of Conference CD
- Listing in the Conference “Virtual Tradeshow”

**THE PREMIER  
SHOWCASE FOR  
ORGANIZATIONS  
SERVING  
CALIFORNIA'S  
PHYSICIAN  
GROUPS**

**NETWORK WITH  
DECISION MAKERS  
from 150-plus  
California medical  
groups and IPAs  
on an informal,  
get-to-know-you basis.**

**SEE YOUR CORPORATE  
NAME AND LOGO  
DISPLAYED  
throughout the  
conference and on our  
conference CD, with  
special recognition for  
top sponsors.**

**DEMONSTRATE YOUR  
PRODUCTS AND  
SERVICES  
at our popular Friday  
Night Exhibit Fair and  
Strolling Dinner.**

**PARTICIPATE  
in our conference  
educational sessions  
and social events.**

*Select sponsorship level online at [www.capg.org](http://www.capg.org)*

## REGISTRATION FEES

<b>CAPG Corporate Partners</b> .....	\$995 each ( <b>over complimentary number included in sponsorship</b> )
<b>CAPG Associate Partners</b> .....	\$1,095 each ( <b>over complimentary number included in sponsorship</b> )
<b>CAPG Affiliate Partners</b> .....	\$1,195 each ( <b>over complimentary number included in sponsorship</b> )
<b>Conference Sponsors (Diamond/Platinum/Gold/Contrib/Exhibitor)</b> . . .	\$1,495 each ( <b>over complimentary number included in sponsorship</b> )
<b>Non-Sponsor, Non-Member/Partner Attendee</b> .....	\$1,975 each
<b>Government Employees</b> .....	\$1,195 each
<b>CHA Members</b> .....	\$995 each
<b>Booth Attendee (Friday Night Exhibit Fair and Strolling Dinner)</b> . . . .	\$495 each
<b>Spouse/Adult Guest Full-Conference Attendee</b> .....	\$355 each
<b>Spouse/Adult Guest Friday or Saturday Pass</b> .....	\$275 each
<b>Babysitting and Youth/Teen Programs</b> .....	\$50 per session/per child
<b>Golf Tournament Participants: Members/Partners (Thursday)</b> . . . . .	\$185 per player
<b>Golf Tournament Participants: Non-Members (Thursday)</b> . . . . .	\$225 per player
<b>Hotel Room</b> .....	\$225 per night, excluding taxes, <b>register directly with the Marriott.</b> See below for details.

## SPECIAL PROGRAM INFORMATION

**Babysitting: Ages 6 months–3 years** (\$50 per child/per session; includes meals.)

**Session 1:** Friday, 8:30 a.m. – 3:00 p.m. **Session 2:** Friday, 6:30 p.m. – 10:00 p.m. **Session 3:** Saturday, 8:30 a.m. – 1:30 p.m.  
**Session 4:** Saturday, 6:30 p.m. – 11:00 p.m.

**Youth Program: Ages 4–11** (\$50 per child/per session; includes meals.)

**Session 1:** Friday, 8:30 a.m. – 3:00 p.m. **Session 2:** Friday, 6:30 p.m. – 10:00 p.m. **Session 3:** Saturday, 8:30 a.m. – 1:30 p.m.  
**Session 4:** Saturday, 6:30 p.m. – 11:00 p.m.

**Teen Program: Ages 12–16** (\$50 per child/per session; includes meals.)

**Session 2:** Friday, 6:30 p.m. – 10:00 p.m. **Session 4:** Saturday, 6:30 p.m. – 11:00 p.m.

**Golf Tournament at the Maderas Golf Club:** \$185 per player member/partners; \$225 per player non-members. Includes green and cart fees, lunch and tournament. Open to full-Conference attendees only. No refunds; player substitutions OK. Thursday, May 29, 10:30 a.m. registration—shotgun start at 11:30 a.m. Information on shuttle service, pairing and tournament details will be e-mailed prior to the conference.

## HOTEL ACCOMMODATIONS (NEW)

*(Please see General Information on page 5 of brochure for details.)*

New this year—hotel accommodations must be made directly with the hotel. A special rate of \$225 plus taxes per room, single or double occupancy, has been arranged for this conference at the San Diego Marriott Hotel & Marina. **Hotel rooms are available on a first-come-first-serve basis; please reserve your space early as rooms fill up fast.** The CAPG special rate can only be guaranteed up to **May 2, 2008** pending availability. To make your reservations, please contact the San Diego Marriott Hotel & Marina at 619-234-1500 and ask for the CAPG Healthcare Conference group rate. Or visit our conference page at [www.capg.org](http://www.capg.org) and use the Marriott link provided.

## THIRD PARTY BILLING

The Marriott Hotel requires that a Third Party Billing Request form be completed if you wish to charge multiple rooms to a single corporate or personal credit card or if the name of the occupant differs from the name on the credit card. Though you may reserve any number of rooms with one credit card, the payment for those rooms will be charged to the occupant unless the Marriott has the Third Party Billing Request form, along with required identification, on file. To request a Third Party Billing form, please contact the San Diego Marriott Hotel & Marina at 619-234-1500. Or download online at [www.capg.org](http://www.capg.org).

## CONFERENCE REGISTRATION

Please print legibly or type; make copies of this form for additional registrations. Please provide a **unique e-mail address** for each registrant.

**Registrant 1:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_ **Fee: \$** \_\_\_\_\_

Golf Tournament Fee: \$ \_\_\_\_\_

**Spouse/Guest:** \_\_\_\_\_

Full Conference     Friday Only     Saturday Only     Golf Tournament Fee: \$ \_\_\_\_\_

**Child 1 (full name):** \_\_\_\_\_ **Age:** \_\_\_\_\_

Session 1     Session 2     Session 3     Session 4 Fee: \$ \_\_\_\_\_

**Child 2** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 3** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Registrant 2:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_ **Fee:** \$ \_\_\_\_\_

Golf Tournament   Fee: \$ \_\_\_\_\_

**Spouse/Guest:** \_\_\_\_\_

Full Conference    Friday Only    Saturday Only    Golf Tournament   Fee: \$ \_\_\_\_\_

**Child 1** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 2** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 3** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Registrant 3:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_ **Fee:** \$ \_\_\_\_\_

Golf Tournament   Fee: \$ \_\_\_\_\_

**Spouse/Guest:** \_\_\_\_\_

Full Conference    Friday Only    Saturday Only    Golf Tournament   Fee: \$ \_\_\_\_\_

**Child 1** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 2** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 3** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Registrant 4:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_ **Fee:** \$ \_\_\_\_\_

Golf Tournament   Fee: \$ \_\_\_\_\_

**Spouse/Guest:** \_\_\_\_\_

Full Conference    Friday Only    Saturday Only    Golf Tournament   Fee: \$ \_\_\_\_\_

**Child 1** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 2** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

**Child 3** (full name): \_\_\_\_\_ Age: \_\_\_\_\_

Session 1    Session 2    Session 3    Session 4   Fee: \$ \_\_\_\_\_

(Registration continues on back)

## CONFERENCE REGISTRATION continued

**Friday Night Booth Attendees** (\$495 each for any over number included in Sponsorship Level)

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

## CALCULATE YOUR FEES

**Sponsorship Level** (see page A for Sponsorship Levels) \_\_\_\_\_ \$ \_\_\_\_\_

**Complimentary Conference Registrants** (See Sponsorship Level for number) \_\_\_\_\_ \$ NO CHARGE

**Additional Conference Registrants** (see page B for fee structure) \$ \_\_\_\_\_

**Booth Attendees: Friday Night Only** (\$495 each per additional booth attendee) \$ \_\_\_\_\_

**Spouse/Adult Guest Full Conference Attendees** (\$355 each; includes all meals) \$ \_\_\_\_\_

**Spouse/Adult Guest Friday or Saturday Pass** (\$275 each; includes all meals for the one day) \$ \_\_\_\_\_

**Babysitting Registrants** (\$50 per session/per child; includes meals) \$ \_\_\_\_\_

**Youth Program Registrants** (\$50 per session/per child; includes meals) \$ \_\_\_\_\_

**Teen Program Registrants** (\$50 per session/per child; includes meals) \$ \_\_\_\_\_

**Golf Tournament Registrants** (Thursday, May 29; \$185 per player members/partners; \$225 non-members) \$ \_\_\_\_\_

**REGISTRATION FEE TOTAL** \$ \_\_\_\_\_

## PAYMENT

Check/Money Order (make payable to CAPG)  American Express  MasterCard  VISA

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ Card ID#\* \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address \_\_\_\_\_

City/ST/ZIP \_\_\_\_\_

\*For Visa and MasterCard, the Card ID Number is the 3-digit number located on the back of your card, usually at the top of the signature strip. For American Express it is the 4-digit number printed on the front of your card.

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**For advance registration please send all completed forms by MAY 15, 2008 to:**

**CAPG Sponsor Registration, 915 Wilshire Blvd., Suite 1620, Los Angeles, CA 90017**

**Or fax to 213-683-0032**

**Or register online at [www.capg.org](http://www.capg.org)**

**Questions? Call 213-624-CAPG (2274)**

**Registrations received after May 15 will be processed onsite and may delay check-in.**

