HAPS Fall Central Regional Meeting – August 7, 2026
Chicago, IL at the University of Illinois at Chicago
Exhibitor Application & Contract
Deadline for submission is June 30, 2026

Company Name:
Contact Person:
Contact Email:
Company Address for Program:
Company Phone Number for Program:
Company Email Address for Program:
Company Description for Program (1-2 sentences only):

Please check if you need: _____Electrical Outlet _____Internet Access

Exhibitor Fees & Payment

Quantity	Description	Cost	Total
	Booth fee:	$400 (**each**)	
	Workshop fee:	$110 (**per session**)	
	Poster fee:	$60 (**per poster**)	
Speaker Sponsor (check with HAPS office to see if available)		$1500	
Breakfast Sponsor (check with HAPS office to see if available)		$1000	
Lunch Sponsorship (check with HAPS office to see if available)		$1000	
Refreshment Sponsor (check with HAPS office to see if available)		$500	
Advertise in Regional program (check with info@hapsconnect.org for availability)		Please refer to page 3 for fee structure	
Door prize donation			
TOTAL DUE			

Sponsorship Opportunities

Speaker Sponsor……$1,500 + speaker expenses (if applicable)
This sponsorship will include the sponsors logo on the speaker and sponsor page of the printed program, company name listed on the schedule on the website and in any promotional material that references the speaker, and an early copy of the attendee list. Sponsors will work with the Regional host to pick a speaker with a non-commercial focus in the pre-planning process or will sponsor a speaker already determined by the Regional host. Sponsors are responsible for any travel/lodging expenses (if applicable). Sponsorship does not include booth or any additional staff registrations.

Breakfast Sponsor……..$1,000
This sponsorship includes the sponsors logo on the sponsor page of the printed program, company name listed on the schedule on the website and in any promotional material that references the event, and an early copy of the attendee list. Sponsorship does not include booth or any additional staff registrations.

Lunch Sponsor……..$1,000
This sponsorship includes the sponsors logo on the sponsor page of the printed program, company name listed on the schedule on the website and in any promotional material that references the event, and an early copy of the attendee list. Sponsorship does not include booth or any additional staff registrations.

Refreshment Sponsor……. $500
This sponsorship includes the sponsors logo on the sponsor page of the printed program, company name listed on the schedule on the website and in any promotional material that references the event, and an early copy of the attendee list. Sponsorship does not include booth or any additional staff registrations.

Place your advertisement in the Regional Program

- Ads may be sent to info@hapsconnect.org
- Deadline to submit an ad for the book is July 13th.

Company _____

Contact Name _____

E-mail _____

Phone _____

FAX _____

Ad Specification Sheet **Black & White**	**Price**
Full size	$75
½ page	$50
Artwork enclosed please circle yes / no Artwork to follow please circle yes / no	
Special Instructions:	

Specifications & Requirements:
Final trim size – 8 x 10.5
All text at least 1/2 inch from edge
Standard ad space (W x H)
½ page – 7.5 x 5
Full page – 7.5 x. 10

Electronic Formats:
.pdf – high resolution
.jpeg files
.eps files
Photoshop .psd
Illustrator .ai

Include **all** fonts and linked artwork.

If the received artwork is not one of the above electronic formats, there may be additional charges. HAPS reserves the right to reject any advertising considered non-conforming to HAPS standards. **Terms**: No agency discounts given on quoted rates. All rates are payable at the time of ad placement. **Priority Placement**: All ads will be placed on a "first come/first serve" basis. **Cancellation/ Refunds**: Orders may be cancelled, and refunds will be given till the reservation date. Cancellations after that time will not be eligible for refunds.

Exhibitor Staff Registration

Booth purchase includes registration for 2 staff members. Extra staff registration without the purchase of an additional table is a fee of $50 per staff member.

Exhibit Staff Name	Email Address	Dietary Restrictions (Regular, Vegetarian, Vegan, Gluten-free, Other)

2025 HAPS Southern Regional Meeting
Exhibitor Application & Contract

Applications may be faxed (706-883-8215), sent as an email attachment to info@hapsconnect.org
If paying by check, please mail application and check to the address below.

Human Anatomy and Physiology Society (HAPS)
251 S. L. White Blvd.
LaGrange, GA 30241

This information will only be used for the Human Anatomy & Physiology Society. For your convenience; we will use this authorization to charge your credit card account (if not paying by check). We will advise you, prior to charging card, of any unpaid balances at the conference or any additional amounts incurred at the show-site by your representative(s). This information is confidential.

Check **type** of credit card: _____MasterCard ____ Visa _____ American Express _____Discover

Credit Card Number _____

Expiration Date _____

CVV _____

Company Name _____

Cardholder's Name _____

Cardholder's Billing Address _____

City, State/Province _____

Zip/Country _____

Signature _____

By signing below, I authorize the Human Anatomy and Physiology Society to charge the card above.

Signed: _____ Date: _____