Contract

AcademyHealth
ANNUAL
RESEARCH MEETING
RIGOR & RELEVANCE DRIVING ACTION

Name

Title

Organization

Address

City

State Zip

Contact Name

Phone Fax

Email

Organization's URL

Organization's LinkedIn

Organization's BlueSky

Organization's X/Twitter Handle:

SPONSOR (select one)

❒ Diamond ($50,000)
❒ Gold ($15,000)
❒ Bronze ($5,000)
❒ Platinum ($25,000)
❒ Silver ($7,500)

Customized Sponsorship Items:

❒ Charging Station Sponsor $10,000
❒ Quiet Room Sponsor $10,000
❒ Digital Signage Sponsor $15,000
❒ Hydration Station Sponsor $15,000
❒ Banner and/or Clings Sponsor $15,000
❒ Headshot Lounge Sponsor $20,000
❒ Mobile App & Push Notification Sponsor $20,000
❒ Social Media Wall Sponsor $20,000
❒ Networking Lounge Sponsor $25,000
❒ Wi-Fi Sponsor $25,000
❒ Wordly AI Translation & Captions Sponsor $40,000
Please list my organization in all materials as:

EXHIBIT

	Org. Member	Government	Non-Member
Booth (10' x 10')	❒ $1,250	❒ $1,850	❒ $2,500

Exhibitor Maximum Exposure package: ❒ $5,500.

Indicate your top booth/table space choices*: 1. 2. 3.

If possible, please do not place me next to the following competitors:

**AcademyHealth will do its best to honor space requests; however, requested spaces are not guaranteed.*

Cancellations

Prior to March 20, 2026, AcademyHealth will refund the space cost for any cancellations received in writing, less a $250 service charge. After March 20, the exhibitor forfeits the entire amount paid.

Exhibitor Description, Sign Name, Website

Email organizational profile (50 words or less), sign name (max 40 characters), and website address to sponsorships@academyhealth.org.

Exhibitor Category (select one)

❒ University-based research/policy programs and center
❒ Non-university research/policy organization
❒ Professional society/trade association
❒ Government agency
❒ Foundation
❒ Publisher
❒ Consulting firm (research and policy-related)
❒ Technology company
❒ Pharmaceutical companies
❒ Other

ADVERTISE

❒ I would like to reserve advertising space

Agenda at a Glance ❒ $12,500

Rate	Org. Member	Non-Member
Tower banner ad	❒ $2,000	❒ $2,550
Inline full ad	❒ $1,500	❒ $2,750
Inline half ad	❒ $1,000	❒ $2,250

PAYMENT (AcademyHealth Tax ID # 52-1260918)

Exhibit Space $ Sponsorship $

Advertising $ Total Due $

❒ Submit invoice to address on the enclosed purchase order
❒ Check payable to AcademyHealth is enclosed
❒ Charge my: ❒ MasterCard ❒ Visa ❒ Discover ❒ AmEx

Account Number

Expiration Date Zip Code

Security Code

Name on Card

Signature

Three Ways to Submit Your Contract

Email: Email form to sponsorships@academyhealth.org
Fax: Fax form with credit card information to 202.292.6864
Mail: Send form with payment to AcademyHealth, Accounting Department, 1666 K Street, NW, Suite 1100, Washington, DC 20006.

For more information, email sponsorships@academyhealth.org