

# PDA WEEK 2025 EXHIBIT AND SPONSORSHIP PACKAGES

Branding, Networking, and Lead Generation Opportunities



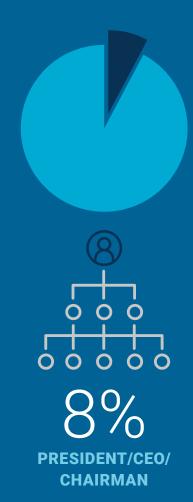
06-11 APRIL | PALM SPRINGS, CA

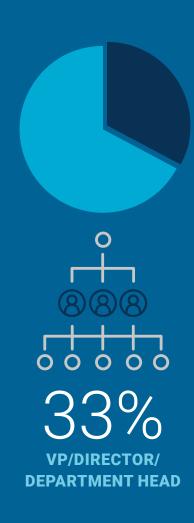
**EXHIBITION: 07-09 APRIL** 

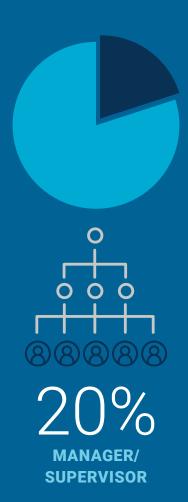


# ATTENDEE DEMOGRAPHICS

# **ATTENDANCE BY JOB TITLES:**









### **Booth Package Components:**



- 10' x 10' Booth
   Each 10' x 10' booth
   includes one 6' x 2.5'
   table, two chairs, and
   waste basket
- (Corner Booth @ an additional \$300)
- Exhibitor Portal Access



### **Registrations**

- 1 Complimentary Full
   Conference Pass
- 2 Complimentary Exhibit Only Passes
- GDPR-Approved Attendee List (Name, Title, Company, Location)
- 10% Discount on Additional Full Conference Passes



### **Visibility**

- Company Name and Booth listed on Event Signage
- Company Logo and Company URL listed on PDA Website



### **Mobile App**

- Company Description Listing
- Company Contact
   Information
- Company Logo
- Category Index Search

# DIAMOND SPONSORSHIP DELIVERABLES \$47,000 (EXCLUSIVE)





### **Exhibit Package**

- 10' x 10' Booth
   Each 10' x 10' booth includes one
   6' x 2.5' table, two chairs, and
   waste basket
- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- Exhibitor Portal Access



### **Additional Registrations**

- 3 Additional Complimentary Full Conference Passes
- 2 Additional Complimentary Exhibit Only Passes
- 10% discount on additional Full Conference Passes



### **Tech Talk Opportunity**

- 10-minute presentation during lunch or break in Exhibit Hall
- Tech Talk description included in the event app



### **Mobile App**

- Splash Page Ad
- Rotating Banner Ad on Main Page
- Company Description Information
- Company Contact Information
- Category Index Search
- Dedicated Sponsor Section for Logo



### **Onsite Visibility**

- 60-Second Commercial Video (MP4 file - Due 15 Jan. 2025
- Company logo on the event signage
- Prominent recognition on the Opening Plenary Session Slides



# PDA Website Recognition on Conference Page

 Company Logo Recognition as a Diamond Sponsor



#### **Email Feature**

- 1 Complimentary Pre-Conference and 1 Complimentary Post-Conference Dedicated Email to Attendees
- Company Logo Recognition on Emails Promoting the Conference

# PLATINUM SPONSORSHIP DELIVERABLES

### **Exhibit Package**

- 10' x 10' Booth
   Each 10' x 10' booth includes one
   6' x 2.5' table, two chairs, and
   waste basket
- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- Exhibitor Portal Access

### **Additional Registrations**

- 2 Additional Complimentary Full Conference Passes
- 1 Additional Complimentary Exhibit Only Pass
- 10% discount on additional Full Conference Passes

### **Tech Talk Opportunity**

- 10-minute presentation during lunch or break in Exhibit Hall
- Tech Talk description included in the event app

### **Mobile App**

- Rotating Banner Ad
- Company Description Information
- Company Contact Information
- Category Index Search
- Dedicated Sponsor Section for Logo

### **Onsite Visibility**

- 45-Second Commercial Video
   (MP4 file Due 15 Jan. 2025
- Company logo on the event signage
- Prominent recognition on the Opening Plenary Session Slides

# PDA Website Recognition on Conference Page

 Company Logo Recognition as a Platinum Sponsor

#### **Email Feature**

- 1 Complimentary Pre-Conference Dedicated Email to Attendees
- Company Logo Recognition on Emails Promoting the Conference

### PLATINUM SPONSOR 1 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the W eless Internet Service
- Login Password Company Name
- Login Splash Page Recognition

### PLATINUM SPONSOR 2 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the Co erence Lanyards

### PLATINUM SPONSOR 3 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the Co erence Hotel Key Cards

### PLATINUM SPONSOR 4 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the Co erence Tote Bag

### PLATINUM SPONSOR 5 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the Co erence Head Shot Photographer

### PLATINUM SPONSOR 6 \$42,000 (EXCLUSIVE)

- Everything listed under Platinum Sponsorship Components
- Official Sponsor of the Massage Boo

# **GOLD SPONSORSHIP DELIVERABLES**

### **Exhibit Package**

- 10' x 10' Booth
   Each 10' x 10' booth includes one
   6' x 2.5' table, two chairs, and
   waste basket
- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- Exhibitor Portal Access

### **Additional Registrations**

- 1 Additional Complimentary Full Conference Pass
- 1 Additional Complimentary Exhibit Only Pass
- 10% discount on additional Full Conference Passes

### **Tech Talk Opportunity**

- 10-minute presentation during lunch or break in Exhibit Hall
- Tech Talk description included in the event app

### **Mobile App**

- Banner Ad on Sub Page
- Company Description Information
- Company Contact Information
- Category Index Search
- Dedicated Sponsor Section for Logo

### **Onsite Visibility**

- 20-Second Commercial Video (MP4 file **Due 15 Jan. 2025**
- Company logo on the event signage
- Prominent recognition on the Opening Plenary Session Slides

# PDA Website Recognition on Conference Page

 Company Logo Recognition as a Gold Sponsor

#### **Email Feature**

- 1 Complimentary Post-Conference Dedicated Email to Attendees
- Company Logo Recognition on Emails Promoting the Conference

### GOLD SPONSOR 1 \$37,000 (EXCLUSIVE)

- Everything listed under Gold Sponsorship Components
- Official Sponsor of the Co erence Pen

### GOLD SPONSOR 2 \$37,000 (EXCLUSIVE)

- Everything listed under Gold Sponsorship Components
- Official Sponsor of the Co erence Note Pad

### **GOLD SPONSOR 3 \$37,000**

- Everything listed under Gold Sponsorship Components
- Official Co-sponsor of unch First Day

### **GOLD SPONSOR 4 \$37,000**

- Everything listed under Gold Sponsorship Components
- Official Co-sponsor of unch Second Day

### **GOLD SPONSOR 5** \$37,000

- Everything listed under Gold Sponsorship Components
- Official Co-sponsor of Networking Recepti

# SILVER SPONSORSHIP DELIVERABLES

### **Exhibit Package**

- 10' x 10' Booth
   Each 10' x 10' booth includes one
   6' x 2.5' table, two chairs, and
   waste basket
- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- Exhibitor Portal Access

### **Additional Registrations**

- 1 Additional Complimentary Exhibit Only Pass
- 10% discount on additional Full Conference Passes

### **Mobile App**

- Banner Ad on Sub Page
- Company Description Information
- Company Contact Information
- Category Index Search
- Dedicated Sponsor Section for Logo

### **Onsite Visibility**

- 15-Second Commercial Video (MP4 file **Due 15 Jan. 2025**
- Company logo on the event signage
- Prominent recognition on the Opening Plenary Session Slides

# PDA Website Recognition on Conference Page

 Company Logo Recognition as a Silver Sponsor

#### **Email Feature**

• Company Logo Recognition on Emails Promoting the Conference

### **SILVER SPONSOR 1 \$32,000**

- Everything listed under Silver Sponsorship Components
- Official Sponsor of One Continental eakfast

### SILVER SPONSOR 2 \$32,000

- Everything listed under Silver Sponsorship Components
- Official Sponsor of One Re eshment Break Day 1 (limit 2 available)

### **SILVER SPONSOR 3 \$32,000**

- Everything listed under Silver Sponsorship Components
- Official Sponsor of One Re eshment Break Day 2 (limit 2 available)

### SILVER SPONSOR 4 \$32,000

- Everything listed under Silver Sponsorship Components
- Official Sponsor of Mobile vice Charging Stations

# BRONZE SPONSORSHIP DELIVERABLES \$20,000

### **Exhibit Package**

- 10' x 10' Booth
   Each 10' x 10' booth includes one
   6' x 2.5' table, two chairs, and
   waste basket
- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- Exhibitor Portal Access

### **Registration Discount**

• 10% discount on additional Full Conference Passes

### **Mobile App**

- Company Description Information
- Company Contact Information
- Dedicated Sponsor Section for Logo

### **Onsite Visibility**

- Company logo on the event signage
- Prominent recognition on the Opening Plenary Session Slides

# PDA Website Recognition on Conference Page

• Company Logo Recognition as a Bronze Sponsor

#### **Email Feature**

 Company Logo Recognition on Emails Promoting the Conference

# À LA CARTE ITEMS

### **Registration Access Upgrade**

Discount on Additional Full Conference Passes – Save 10% on individual Full Conference Passes

Group Registration Discount -

Buy 3 Full Conference Passes at the prevailing rate and get the 4th free **Save from \$2,000 – \$3,000** 

Pre-Conference HTML Email to Conference Attendees \$3,800

Post-Conference HTML Email to Conference Attendees \$3,800

Posts on PDA's LinkedIn or Twitter \$4,000 each

#### Other Items

Lunch \$15,000

Continental Breakfast \$10,000

Refreshment Break \$10,000

Networking Reception: Food - \$10,000 | Bar - \$7,000 | Entertainment - \$5,000

Door Drops \$4,500 plus room delivery charge

Insert in Conference Tote Bag \$4,500

Seat Drop \$4,500 during plenary session (limit 2 availability)

Coffee Station \$3,000

Banner Tile \$1,500 (limit 3 availability)

Passport Raffl \$1,000

Water Bubblers \$1,000 (per station)

### **Tech Talk Opportunity \$3,900**

10-Minute Presentation

Podium Time in the Exhibit Hall during lunch or break

Includes one full conference registration for your Tech Talk presenter

PDA provides monitor, microphone, and speaker

#### **FEATURES**

- Featured in Event Mobile App
- Tech Talk Information in Agenda
- Tech Talk Information on Signage
- Featured on event website as a presenter

			T MI	111/2	JM 3	11114	5 / 11/2	7M 6									
DELIVERABLES	DIAMONE	PLATIM	PLATIM	PLATI	PLATIMIL	PLATIN	PLATIM	GOLD 1	60LD ,	GOLD3	GOLD 4	GOLDS	SILVER	SILVER	SILVER	SILVER	BRONZE
Official Sponsor of the Conference App (Splash Page Opening, tile on app)	•																
Official Sponsor of the Wireless Internet Service																	
Official Sponsor of the Conference Lanyards			•														
Official Sponsor of the Conference Hotel Key Cards				•													
Official Sponsor of the Conference Tote Bag					•												
Official Sponsor of the Conference Head Shot Photographer						•											
Official Sponsor of the Massage Booth							•										
Official Sponsor of the Conference Pen								•									
Official Sponsor of the Conference Note Pad									•								
Official Co-sponsor of Lunch – First Day										•							
Official Co-sponsor of Lunch – Second Day											•						
Official Co-sponsor of Networking Reception												•					
Official Sponsor of One Continental Breakfast													•				
Official Sponsor of One Refreshment Break Day 1														•			
Official Sponsor of One Refreshment Break Day 2																	
Official Sponsor of Mobile Device Charging Stations																•	
Visibility Sponsor																	•
DELIVERABLES:																	
Tech Talk	•	•	•	•	•	•	•	•	•	•	•	•					
Registrations 1 Full Conference Pass and 2 Exhibit Only Passes	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
<ul> <li>Additional Registrations</li> <li>3 Additional Full Conference Passes and 2 Additional Exhibit Only Passes</li> <li>2 Additional Full Conference Passes and 1 Additional Exhibit Only Pass</li> <li>1 Additional Full Conference Pass and 1 Additional Exhibit Only Pass</li> <li>1 Additional Exhibit Only Pass</li> </ul>	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Registration Discount - Full Conference Passes 10% Discount	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Mobile App – Listing with Category Index	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Mobile App – Rotating Banner Ad on Main Page	•	•	•	•	•	•	•										
Mobile App - Banner or Tile Ad on Sub Page								•	•	•	•	•	•	•	•	•	
PDA App Recognition	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Onsite Visibility - Entrance Unit Recognition	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Video Commercial (MP4 due 15 Jan. 2025)	60 secs	45 secs	45 secs	45 secs	45 secs	45 secs	45 secs	20 secs	20 secs	20 secs	20 secs	20 secs	15 secs	15 secs	15 secs	15 secs	
Email Feature  • Pre- and Post-HTML email blast  • Pre-HTML email blast  • Post- HTML email blast	•	•	•	•	•	•	•	•	•	•	•	•					
Company Logo Recognition on Emails Promoting the Conference	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•

<sup>\*</sup> For full details, review sponsorship packages.



# PDA WEEK AWARDS CEREMONY AND DINNER SPONSORSHIPS

Make your name stand out. The PDA Awards Dinner and Ceremony is the place where connections are made. Running for an hour prior to the dinner and open to all 600+ attendees, the Reception offers an open bar and hors d'oeuvres. The Dinner and Ceremony will include a special meal and awards presentations.

# All sponsors receive the following Primary Features (unless otherwise noted):

- One 8-seat table at Awards Dinner with priority room placement
- Recognition in Pre-event marketing and on-site event materials
- Recognition in Annual Meeting agenda

# PLATINUM SPONSORSHIP \$6,250

- Eight tickets to Reception
- Sponsorship of the PDA Awards Reception, Dinner, and Ceremony
- Recognition at Reception, Dinner, and Ceremony
- Opportunity for swag bag (provided by sponsor) distribution at event
- Recognition on PDA Social Media and website
- Company name on table tent
- Special photo opportunities

# GOLD SPONSORSHIP \$3,500

- Eight tickets to Reception
- Special recognition at the Reception and Dinner
- Sponsorship of Food at the Reception
- Recognition on PDA website
- Company name on table tent

# **SILVER SPONSORSHIP** \$2,500

- Eight tickets to Reception
- Special recognition at the Reception and Dinner
- Sponsorship of Bar at the reception
- Company name on table tent

# **BRONZE SPONSORSHIP** \$1,250

- Eight tickets to Reception
- Special recognition at the Dinner
- Company name on table tent

# **HALF-TABLE** \$625

• Four tickets to Reception and one-half table at the dinner (4 tickets). All seats will be located at the same table

# **ATTENDEE** \$125

• One ticket for Reception and one Seat at the Dinner. Seats purchased separately may not be at the same table



EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

DIAMOND SPONSORSHIP  DIAMOND SPONSOR \$47,000 (Includes 4 Full Conference Passes and 4 Exhibitation)  PLATINUM SPONSORSHIPS					À LA CARTE OPTIONS:  □ Pre-Conference HTML Email to Conference Attendees \$3,800 □ Post-Conference HTML Email to Conference Attendees \$3,800 □ Posts on PDA's LinkedIn or Twitter \$4,000 each
PLATINUM SPONSOR 1 \$42,000 (EXCLUSIVE) PLATINUM SPONSOR 2 \$42,000 (EXCLUSIVE)	PLATINUM SPONSOR 3 \$42,000 (EXCLUSIVE)  Dit Only Passes.)	□ PLATINUM SPONSOR 4 \$42,000 (EXCLUSIVE)	□ PLATINUM SPONSOR 5 \$42,000 (EXCLUSIVE)	□ PLATINUM SPONSOR 6 \$42,000 (EXCLUSIVE)	REGISTRATION ACCESS UPGRADE  □ 10% Discount on Additional Full Conference Passes – single pass rate □ Group Registration Rate (Buy 3 full conference passes at the standard prevailing rate and get 4th Free) – Save from \$2,000 – \$3,000!
GOLD SPONSORSHIPS  GOLD GOLD SPONSOR 1 \$37,000 (EXCLUSIVE)  GOLD SPONSOR 2 \$37,000 (EXCLUSIVE)  (Includes 2 Full Conference Passes and 3 Exhibit	GOLD SPONSOR 3 \$37,000	□ gold sponsor 4 \$37,000	□ gold sponsor 5 \$37,000		OTHER ITEMS  Lunch \$15,000  Continental Breakfast \$10,000  Refreshment Break \$10,000  Networking Reception:  Food \$10,000
SILVER SPONSORSHIPS  SILVER SPONSOR 1 \$32,000  SILVER SPONSOR 2 \$32,000  (Includes 1 Full Conference Pass and 3 Exhibit)  BRONZE SPONSORSHIP  BRONZE SPONSOR \$20,000  (Includes 1 Full Conference Pass and 2 Exhibit)		□ SILVER SPONSOR 4 \$32,000			<ul> <li>□ Bar \$7,000</li> <li>□ Entertainment \$5,000</li> <li>□ Door Drop \$4,500 plus room delivery charges</li> <li>□ Seat Drop \$4,500 (materials to arrive directly to conference site and provided to sales team on set up day.)</li> <li>□ Tote Bag Insert \$4,500</li> <li>□ Coffee Station \$3,000</li> <li>□ Banner Tile \$1,500 (limit 3)</li> <li>□ Passport Ra e \$1,000</li> <li>□ Water Bubblers \$1,000 (per station)</li> <li>□ Tech Talk Opportunity \$3,900 (10 Minute Presentation during lunch in the Exhibit Hall)</li> </ul>
Contact Information: Administrator will receive all event co	rrespondence and ir	voice along with pa	ayment details. * <b>RE</b> C	QUIRED FIELDS	Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED – By checking the

\* Email \* Business Phone Date Signature

The person signing this document represents the exhibitor company and acknowledges that they have read and agree to abide by the rules and

\* Name

\* Job Title

\* Company

\* Company Address

\* City/State/Zip Code

regulations of this Contract. (see attached)

box below, I consent to:

 $\square$  My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with Exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.



 $\square$  PLATINUM SPONSORSHIP \$6,250

### **PDA WEEK 2025** AWARDS CEREMONY AND DINNER SPONSORSHIPS

07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Make your name stand out. The PDA Awards Dinner and Ceremony is the place where connections are made. Running for an hour prior to the dinner and open to all 600+ attendees, the Reception offers an open bar and hors d'oeuvres. The Dinner and Ceremony will include a special meal and awards presentations.

$\Box$ <b>GOLD SPONSORSHIP</b> \$3,500		
$\Box$ silver sponsorship \$2,500		
□ BRONZE SPONSORSHIP \$1,250		
□ HALF-TABLE \$625		
□ ATTENDEE \$125		
Contact Information: Administrator will receive all correspondence as Administrator * Name	nd invoice along with payment details. *REQUIRED FIELDS	Your consent is important your personal data respon RESPONSE REQUIRED – B box below, I consent to:
* Job Title		☐ My contact information (na
* Company		job title, city, state, country in the attendee list distribu
* Company Address		My contact information be
* City/State/Zip Code		Exhibitors/Sponsors. PDA
* Email	* Business Phone	and using those recordings
Signature	Date	promotional and marketing
The person signing this document represents the sponsoring or regulations of this Contract. (see attached)	company and acknowledges that they have read and agree to abide by the rules and	PDA sending me promotio via email. PDA sending me

t. We manage nsibly. By checking the

ame, company, ) being included ited at the event. ing shared with recording me s in future PDA materials. nal information promotional information via post.



## PDA WEEK 2025 SPONSOR RULES AND REGULATIONS

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

# CONFIRMATION OF PASSES INCLUDED WITH EXHIBIT PACKAGE:

Please allow one week for receipt of confirmation. We must receive your names by **3 February 2025**. Badges can be picked up on site on 03 April at the registration counter.

# FULL CONFERENCE PASS INCLUDED WITH THE EXHIBIT PACKAGE:

The Full Conference Pass allows access to the plenary/concurrent sessions, access to the Exhibit Hall, posters, and tech talks. Badges can be picked up on site on 03 April at the registration counter.

## CONFIRMATION OF ADDITIONAL FULL CONFERENCE PASSES:

An email confirmation will be sent once p yment is received. You must have this written confirmation o be considered enrolled in a PDA event. Please allow one week for receipt of confirmation email

# SUBSTITUTIONS ON FULL CONFERENCE AND WITH THE EXHIBIT PACKAGE:

Substitutions can be made in writing before **3 February 2025**. Substitutions on additional Full
Conference Badges: If you are unable to attend,
substitutions can be made at any time before **3 February 2025** with no change fee.

### REFUNDS ON ADDITIONAL FULL CONFERENCE AND ADDITIONAL EXHIBIT HALL PASSES:

Refund requests must be emailed to registrations@pda.org. Refunds for Conference: If your written request is received on or before **3 February 2025**, you will receive a full refund minus a \$200 processing fee. After that time, no refunds or credit requests will be approved. PDA reserves the right to modify the material or speakers/instructors without notice or to cancel an event. If an event must be canceled, registrants will be notified by PDA in writing as soon as possible and will receive a full refund. PDA will not be responsible for penalties or other costs incurred due to cancellation. For more details, contact PDA at registration@pda.org or +1 (301) 656-5900.

#### **REFUNDS ON SPONSORSHIPS:**

Refund requests must be in writing and emailed to David Hall at hall@pda.org before **01 December 2024** to receive a partial refund. PDA will keep 20% of the total amount of your sponsorship. Requests after this date will be denied and no refunds or credit equests will be approved.

**REPRESENTATIVE'S PERSONAL DATA:** I warrant and represent that I have all necessary authority and, if necessary, the consent of the Sponsor's representative to provide the representative's personal information in connection with the formation and performance of this contract. The processing of the representative's personal data will be subject to the event's Privacy Notice: **pda.org/event-privacy-notice**, original privacy policy: **pda.org/privacy-policy** 

#### **ATTENDEE LIST:**

- a. Attendee List. The Sponsor shall not use any personal information, including names, email addresses, mailing addresses, or any other information obtained from the event's attendee list circulated among or otherwise generally made available to the event's attendees (the "Attendee List") for any purpose. Notwithstanding the foregoing, in the event the Sponsor's representative is registered as an attendee to the event, the representative may use the Attendee List solely for his or her personal networking purposes.
- b. Marketing List. PDA may provide the Sponsor with a list of a subset of attendees, other than the general Attendee List, which shall include the contact information of such individuals who have consented to PDA sharing their personal information with the event sponsor for the sponsor's own marketing purposes (the "Marketing List"). The Sponsor shall not, and warrants and represents that it shall not, share or disclose the Marketing List to any third party unless such sharing or disclosure is solely for purposes of the Sponsor's own business purposes (e.g., the Exhibitor's service providers).

All prices in U.S. dollars.

Please note: In order to receive the prevailing registration rate, your registration(s) must be received by PDA by 17:00 EDT (UTC -4) on or before the date noted.



# PDA WEEK 2025 SPONSOR RULES AND REGULATIONS (CONTINUED)

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

### ATTENDEE DATA - EEA: pda.org/escc

- **a. EEA Individuals.** This section pertains only to the extent of the sharing by PDA with the Sponsor of personal data of individuals located in the European Economic Area (EEA) ("Data Subjects").
- b. Data Protection Laws. Exhibitor acknowledges and agrees that, in connection with the Exhibitor Contract, it may receive personal data of individuals located in the European Economic Area (EEA) and such data may be subject to certain data protection laws, including the EU General Data Protection Regulation (GDPR), the EU Privacy Directive as may be replaced by the EU Privacy Regulation, and the corresponding implementing national laws (collectively, the "EU Data Protection Laws"). The Exhibitor warrants and represents that it will comply with all data protection requirements under the EU Data Protection Laws, and its controller obligations, when processing personal data of Data Subjects. PDA shall comply with its own obligations under EU Data Protection Laws when processing personal data of Data Subjects as a controller.
- c. Cooperation. The Sponsor and PDA will assist each other in complying with their respective obligations under EU Data Protection Laws, including but not limited to, assisting each other with verifying the authenticity of Data Subjects or responding to Data Subject requests. To the fullest extent required by applicable law, the Sponsor shall be responsible for providing to, and respond to inquiries and requests from, the Data Subjects.

- d. International Transfers. Unless the Exhibitor (a) is located in the EEA or in a jurisdiction with an adequacy decision from the European Commission or (b) has under the US Privacy Shield or adopted another personal data transfer mechanism approved by the European Commission, the following shall apply: The transfer of personal data from PDA to the Sponsor shall be made pursuant to the terms of the Standard Contractual Clauses (EU Commission Decision C(2004)5721 found here (hyperlinked) and incorporated herein. For purposes of the Standard Contractual Clauses, PDA shall be the "data exporter" and the Sponsor the "data importer." Execution and delivery of this Addendum shall be deemed execution and delivery of the Standard Contractual Clauses.
- e. Restrictions. The Sponsor shall not share the personal data of Data Subjects with any third parties, except for purposes of such third parties acting on behalf of the Sponsor for Sponsor's own business purposes.
- f. The Sponsor shall defend, hold harmless, and indemnify PDA as to any third party's claims, actions, investigations, or other proceedings and related damages, injuries, awards, or other liabilities in connection with the Exhibitor's violations of its obligations under this Section (Attendee Data EEA).
- g. Contact. The individuals signing this Agreement on behalf of the parties shall be deemed to be the contact persons for all data protection inquiries in connection with the personal data of Data Subjects being transferred hereunder.



EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Take advantage of increased brand visibility and exposure to a global audience at *PDA Week 2025*. Through customized exhibit and sponsorship packages, you can create your own package to showcase your latest innovations, technology, products, and services to industry leaders and key decision makers.

COST: \$7,295 + \$300 Corner Charge (if applicable)

### **Exhibition Package Includes:**

#### **FEATURES**

- 10' x 10' Booth (Each 10' x 10' booth includes one 6' x 2.5' table, two chairs, and waste basket)
- Access to Exhibitor Portal
- (Corner Booth @ an additional \$300)

#### **REGISTRATIONS**

- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- GDPR-Approved Attendee List (Name, Title, Company, Location)
- 10% Discount on Additional Full Conference Passes

#### **MOBILE APP**

- Company Description (50 words max)
- Company Contact Information
- Company Logo Recognition
- Company URL
- Category Index

### **VISIBILITY**

- Company Name and Booth listed on Event Signage
- Company Logo on Event Website

воотн соѕт	\$ 7,295
CORNER CHARGE \$300 (if applicable)	\$
TOTAL COST	\$
BALANCE DUE	\$

#### **Contact Information**

Booth Administrator will receive all show correspondence. \*REQUIRED FIELDS.

#### **Booth Administrator**

* Name		
* Job Title		
* Company		
* Company Address		
* City		
* State/Province		
* Zip/Postal Code		
* Country		
* Email		
* Business Phone		
Signature		Date
Select top 3 choices for I	Rooth:	
	<b>2</b>	<u> </u>
	my company near:	
If possible, do not place r		
If possible, do not place r  Contact Person for	my company near:	
If possible, do not place r	my company near:	
If possible, do not place r  Contact Person for  * Name  * Email Address	my company near:	
If possible, do not place r  Contact Person for Name	or Invoicing (Fill if different than poin	

For more information on PDA's Privacy and Event Privacy Policies, please visit pda.org/privacy-policy and pda.org/event-privacy-notice

\* Country

\*I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

By registering for this meeting, you agree to abide by the PDA Code of Conduct.

For more information, contact David Hall at + 1 (240) 688-4405 or hall@pda.org or Alison Caballero at +1 (301) 656-5900 or caballero@pda.org.



# PDA WEEK 2025 EARLY BIRD EXHIBITION PACKAGE

**EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA** 

Take advantage of increased brand visibility and exposure to a global audience at *PDA Week 2025*. Through customized exhibit and sponsorship packages, you can create your own package to showcase your latest innovations, technology, products, and services to industry leaders and key decision makers.

COST: \$6,995 + \$300 Corner Charge (if applicable)

### **Exhibition Package Includes:**

#### **FEATURES**

- 10' x 10' Booth (Each 10' x 10' booth includes one 6' x 2.5' table, two chairs, and waste basket)
- · Access to Exhibitor Portal
- (Corner Booth @ an additional \$300)

### **REGISTRATIONS**

- 1 Complimentary Full Conference Pass
- 2 Complimentary Exhibit Only Passes
- GDPR-Approved Attendee List (Name, Title, Company, Location)
- 10% Discount on Additional Full Conference Passes

#### **MOBILE APP**

- Company Description (50 words max)
- Company Contact Information
- Company Logo Recognition
- Company URL
- Category Index

### VISIBILITY

- Company Name and Booth listed on Event Signage
- Company Logo on Event Website

BOOTH COST	\$ 6,995
CORNER CHARGE \$300 (if applicable)	\$
TOTAL COST	\$
BALANCE DUE	\$

#### **Contact Information**

Booth Administrator will receive all show correspondence. \*REQUIRED FIELDS.

#### **Booth Administrator**

* Name		
* Job Title		
* Company		
* Company Address		
* City		
* State/Province		
* Zip/Postal Code		
* Country		
* Email		
* Business Phone		
Signature		Date
<u></u>		
	Booth:  Output  Output	
0	<u> </u>	
If possible, do not place n	<u> </u>	
If possible, do not place m  Contact Person fo	ny company near:	
If possible, do not place n	ny company near:	
If possible, do not place m  Contact Person fo  * Name	ny company near:	
If possible, do not place m  Contact Person fo  * Name  * Email Address	ny company near:  r Invoicing (Fill if different than poin	

For more information on PDA's Privacy and Event Privacy Policies, please visit pda.org/privacy-policy and pda.org/event-privacy-notice

\*I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

\* Country

By registering for this meeting, you agree to abide by the PDA Code of Conduct.

For more information, contact David Hall at + 1 (240) 688-4405 or hall@pda.org or Alison Caballero at +1 (301) 656-5900 or caballero@pda.org.



## PDA WEEK 2025 EXHIBITION RULES AND REGULATIONS

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

- 1 MEETING SUPPORT AND MANAGEMENT: The Conference and Exhibition are produced by and are the property of the Parenteral Drug Association, Inc., hereinafter referred to as "PDA." PDA and its Exhibits Committee will provide all meeting management functions and establish all meeting policies. Exhibitors are required to sign the Contract and by doing so, they subscribe to the Rules and Regulations, which are part of this Contract.
- WHAT MAY BE EXHIBITED: The PDA Exhibits Committee determines the eligibility of any company or product for exhibit. The Committee may forbid installation or request removal or discontinuance of any exhibit or promotion, wholly or in part, that in its opinion is not in keeping with the Association's character or purpose.
- 3 ASSIGNMENT OF SPACE: Space will be allocated in the order in which reservations are received with consideration of priority points. PDA reserves the right to relocate exhibits as necessary.
- PAYMENT SCHEDULE: If payment in full is not received as scheduled on contract, PDA has sole discretion to reassign the space to applicants on the waiting list. No space will be confirmed without cont act and deposit. Space is contracted at the rates indicated on the contract.
- MOVE-IN/MOVE-OUT: Set-up is scheduled for Sunday, 06 April 2025 (time will be emailed). Teardown is scheduled on Wednesday, 09 April 2025. (time will be emailed.) All exhibitors must set up and teardown their exhibits during these scheduled times unless otherwise authorized by PDA. It is the duty and responsibility of each exhibitor to supervise the installation and removal of their exhibits. Dismantling: Early dismantle will result in a one-year suspension from the next PDA Meeting. The exhibitor expressly agrees not to dismantle his exhibit or commence any packing before the final closing hour of the exhibit po tion of the program. Handling and installation must conform to hotel regulations and instructions. No bills, attachments, etc., to the property are permitted unless previously authorized. Exhibitors are responsible for any or all damages to the hotel caused by their representatives or exhibit.

- 5 STANDARD FURNISHINGS: Each booth space includes a six-foot skirted table, chair, trash can, identification sign, pipe and d ape. Twenty-four-hour general security will begin at the start of the meeting and conclude at the close of the meeting. General lighting and cleaning services will be furnished. See Exhibit Rules and Regulations for more details.
- 7 EXHIBIT SPACE RESTRICTIONS: Exhibitor displays must not exceed the space reserved. No space, or part thereof, shall be sublet without prior approval of PDA.
- REFUND POLICY: If the Exhibition is cancelled by PDA for any reason, the contract is nonbinding and all payments for booth space will be refunded. PDA will not be responsible for discount airfare penalties or other costs incurred by Exhibitor due to a cancellation. Exhibitor may not cancel this contract or reduce the amount of assigned exhibit space without written notification o and written permission of PDA. In the event of cancellation or reduction, Exhibitor shall pay to PDA an amount, as liquidated damages, equal to 20% of the total booth space fee attributable to the exhibit space cancelled or reduced. Any balance remaining from the total booth space fee attributable to the exhibit space cancelled or reduced that has been paid by Exhibitor less liquidated damages will be refunded to Exhibitor by PDA. After 01 December 2024, no cancellation or reduction of assigned exhibit space will be permitted and Exhibitor shall remain liable for the total booth space fee stated in this contract.
- 9 LABOR / SAFETY / FIRE CODES: The Exhibitor is responsible for knowledge of and compliance with all union requirements and fi e and safety codes. Decorations must be flame p oofed. Electrical wiring must conform to all federal, state and municipal government requirements. If inspection indicates that an Exhibitor has neglected to comply with these regulations, or otherwise incurs fi e hazards, the right is reserved to cancel at Exhibitor expense all or such part of the Exhibit as may be irregular.
- 10 EXHIBITOR BADGES: If additional Exhibit-only Badges are needed, they may be purchased separately at a cost of \$700. The Exhibit Only Badge provides access to all meals and networking events in the Exhibit Area.



## PDA WEEK 2025 EXHIBITION RULES AND REGULATIONS (CONTINUED)

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

- 11 EXHIBITOR REPRESENTATIVES: Exhibits must be staffed during exhibit hours by qualified emply ees of the Exhibitor. These representatives must be able to explain/demonstrate the products and services on display. All representatives shall review the exhibit contract and abide by the Rules and Regulations of PDA.
- 12 SECURITY AND LIABILITY: Each exhibitor and supporter must make provisions for the safeguarding of his goods, materials, equipment and display at all times. General overall security will be provided by PDA during show days. Each exhibitor and supporter assumes the entire responsibility and liability for losses, damages and claims arising out of injury or damage to exhibitor's or supporter's displays, equipment and other property brought upon the premises of the Hotel, and shall indemnify hold harmless PDA and authorized representative agents or employees of the foregoing of any and all losses, damages and claims. In holding the Meeting, PDA does not act as the agent of the exhibitor or supporter, the facility, the General Service Contractor, or any other party. Claims against any party other than PDA are to be submitted directly to the party involved.
- 13 SOCIAL FUNCTIONS: All hospitality functions must be approved by PDA. Any function not approved by PDA that would compete for attendee's time, either during the hours of the Exhibition, educational programs, or PDA social functions is strictly prohibited.
- 14 ENFORCEMENT OF RULES: PDA and its Exhibits Committee have full power of interpretation and enforcement of these regulations and other points not covered here. Violation of any of these regulations on the part of the Exhibitor, his employees or agents, shall, at the option of PDA, forfeit the right to occupy space and such Exhibitor will forfeit to PDA all monies paid.
- 15 GENERAL INFORMATION: All matters and questions not covered by these regulations are subject to the discretion of PDA and its Exhibits Committee. These regulations may be amended at any time by PDA, and all amendments shall be equally binding on all parties affected by them, are the original regulations.

16 REPRESENTATIVE'S PERSONAL DATA: I warrant and represent that I have all necessary authority and, if necessary, the consent of, the Exhibitor's representative to provide the representative's personal information in connection with the formation and performance of this contract. The processing of the representative's personal data will be subject to the event's Privacy Notice. For more information on our privacy policies, please visit pda.org/privacy-policy and for event-specific privacy information, visit pda.org/event-privacy-notice

#### **17 ATTENDEE LIST:**

- a. Attendee List. The Exhibitor shall not use any personal information, including names, email addresses, mailing addresses or any other information obtained from the event's attendee list circulated among or otherwise generally made available to the event's attendees (the "Attendee List") for any purpose. Notwithstanding the foregoing, in the event the Exhibitor's representative is registered as an attendee to the event, the representative may use the Attendee List solely for his or her personal networking purposes.
- b. Marketing List. PDA may provide the Exhibitor with a list of a subset of attendees, other than the general Attendee List, which shall include the contact information of such individuals who have specifically consented to PDA sharing their personal information with the event exhibitors for the exhibitors' own marketing purposes (the "Marketing List"). The Exhibitor shall not, and warrants and represents that it shall not, share or disclose the Marketing List to any third party unless such sharing or disclosure is solely for purposes of the Exhibitor's own business purposes (i.e., the Exhibitor's service providers).



# PDA WEEK 2025 EXHIBITION RULES AND REGULATIONS (CONTINUED)

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

#### **18 ATTENDEE DATA – EEA:**

- **a. EEA Individuals.** This section pertains only to the extent of the sharing by PDA with the Exhibitor of personal data of individuals located in the European Economic Area (EEA) ("Data Subjects").
- b. Data Protection Laws. Exhibitor acknowledges and agrees that, in connection with the Exhibitor Contract, it may receive personal data of individuals located in the European Economic Area (EEA) and such data may be subject to certain data protection laws, including the EU General Data Protection Regulation (GDPR), the EU ePrivacy Directive as may be replaced by the EU ePrivacy Regulation, and the corresponding implementing national laws (collectively, the "EU Data Protection Laws"). The Exhibitor warrants and represents that it will comply with all data protection requirements under the EU Data Protection Laws, and its controller obligations, when processing personal data of Data Subjects. PDA shall comply with its own obligations under EU Data Protection Laws when processing personal data of Data Subjects as a controller.
- c. Cooperation. The Exhibitor and PDA will assist each other in complying with their respective obligations under EU Data Protection Laws, including but not limited to, assisting each other with verifying the authenticity of Data Subjects or responding to Data Subject requests. To the fullest extent required by applicable law, the Exhibitor shall be responsible for providing notifications o, and respond to inquiries and requests from, the Data Subjects.

- d. International Transfers. Unless the Exhibitor (a) is located in the EEA or in a jurisdiction with an adequacy decisions from the European Commission or (b) has self-certified under the US Pri acy Shield or adopted another personal data transfer mechanism approved by the European Commission the following shall apply: The transfer of personal data from PDA to the Exhibitor shall be made pursuant to the terms of the Standard Contractual Clauses (EU Commission Decision C(2004)5721 found at pda.org/escc and incorporated herein. For purposes of the Standard Contractual Clauses, PDA shall be the "data exporter" and the Exhibitor the "data importer." Execution and delivery of this Addendum shall be deemed execution and delivery of the Standard Contractual Clauses.
- e. Restrictions. The Exhibitor shall not share the personal data of Data Subjects with any third parties, except for purposes of such third parties acting on behalf of the Exhibitor for Exhibitor's own business purposes.
- **f. Indemnification** The Exhibitor shall defend, hold harmless, and indemnify PDA as to any third party's claims, actions, investigations, or other proceedings and related damages, injuries, awards, or other liabilities in connection with the Exhibitor's violations of its obligations under this Section 18 (Attendee Data EEA).
- g. Contact. The individuals signing this Agreement on behalf of the parties shall be deemed to be the contact persons for all data protection inquiries in connection with the personal data of Data Subjects being transferred hereunder.



# **PDA WEEK 2025**

# COMPLIMENTARY EXHIBIT PACKAGE REGISTRATION FORM – 10' x 10' BOOTH SIZE

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Each Exhibit Booth Package includes 1 complimentary Full Conference Pass and 2 complimentary Exhibit Only Passes. Confirmations a e sent directly to the registration emails provided on this form. Your registrations must be submitted by 03 February. A \$50 penalty will be applied for submissions/substitutions after this date.

Access to all conference sessions, Exhibit Hall, Poster Presentations, and Tech Talks. POSTER PRESENTERS OR CO-PRESENTERS are required to purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or co-presenter submissions. \*REQUIRED FIELDS

Complimentary Full Conference Pass	Select One (required): ☐ New Submission	□ Substitution   □ Cancellation   □	Previously Submitted – No Change
* Name			
* Job Title		* Company	
* Address			
* City	* State/Province	* Zip/Postal Code	* Country
* Email		* Business Phone	
☐ Substituting for			

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

### **Complimentary Exhibit Only Passes**

Access to Exhibit Hall, Poster Presentations, and Tech Talks. **POSTER PRESENTERS OR CO-PRESENTERS** are required to purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or co-presenter

submissions *REQUIRED FIELDS	·		
Ocomplimentary Exhibit Only Pas	ss Select One (required): □ New Submission   □	I Substitution   □ Cancellation   □ Pre	viously Submitted – No Change
* Name			
* Job Title		* Company	
* Address			
* City	* State/Province	* Zip/Postal Code	* Country
* Email		* Business Phone	
☐ Substituting for			
© Complimentary Exhibit Only Pas	box, I consent to my personal data being shared as detailed  Select One (required):   New Submission		·
* Name			
* Job Title		* Company	
* Address			
* City	* State/Province	* Zip/Postal Code	* Country
* Email		* Business Phone	
☐ Substituting for			

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

By registering for this meeting, you agree to abide by the PDA Code of Conduct.

<sup>\*</sup>I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via email.



### **PDA WEEK 2025**

# COMPLIMENTARY EXHIBIT PACKAGE REGISTRATION FORM – 20' x 10' BOOTH SIZE

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

**Complimentary Full Conference Pass Information for 20' x 10' booth:** Your booth Package includes 2 complimentary Full Conference Passes and 4 complimentary Exhibit Only Passes. Confirmations a e sent directly to the registration emails provided on this form. To purchase additional Full Conference Passes, use the Additional Badge Request Order Form. Your registrations must be submitted by **03 February**. A \$50 penalty will be applied for submissions/substitutions after this date.

Access to all conference sessions. Exhi	e Passes		
Access to all conference sessions, Exti	bit Hall, Poster Presentations, and Te	ch Talks. <b>POSTER PRESENTERS</b> (	<b>OR CO-PRESENTERS</b> are required to
urchase a standard Full Conference	·	uded with booth package does no	ot qualify for poster presenter or co-
resenter submissions. *REQUIRED FIELD	os		
Complimentary Full Conference Pass	Select One (required): ☐ New Submiss	sion   $\square$ Substitution   $\square$ Cancellatio	on │ □ Previously Submitted - No Chang
Name			
Job Title		* Company	
Address	# Objets (Duranian as	# 7% (D	# O
City Email	* State/Province	* Zip/Postal Code  * Business Phone	* Country
3 Substituting for		Dusiness i none	
our consent is important. We manage your	porconal data reconneibly		
RESPONSE REQUIRED $\Box$ * – By checking the box, I co		d in the gray box below and agree to comply wit	th PDA rules an regulations.
Complimentary Full Conference Pass	Select One (required):   New Submiss	sion   🗆 Substitution   🗅 Cancellation	on │ □ Previously Submitted - No Chang
Name			
Job Title		* Company	
Address			
City	* State/Province	* Zip/Postal Code	* Country
Email  I Substituting for		* Business Phone	
Your consent is important. We manage your preserved is important. We manage your preserved is increased in the box, I consider the box, I consider the box. I consider the box is a consideration of the box. I consider the box is a consideration of the box. I consider the box is a consideration of the box is a consideration of the box is a consideration of the box. I considerate the box is a consideration of the box. I consideration of the box is a consideration of the box. I consideration of the box is a consid		d in the gray boy below and agree to comply with	th DDA rules an regulations
by checking the box, i co	insent to my personal data being snaled as detaile	u iii tile gray box below and agree to comply wit	in FDA Tules all regulations.
Complimentary Exhibit Only Pa	sses		
ccess to Exhibit Hall, Poster Presentat	tions, and Tech Talks. <b>POSTER PRES</b>	ENTERS OR CO-PRESENTERS a	re required to purchase a
tandard Full Conference pass. The F	•		·
ubmissions.* <b>required fields</b>	an comercince pace menada man s	oom paonago accomer quamy re-	poster presenter er de presenter
·			
Complimentary Exhibit Only Pass Sel	ect One (required): $\square$ New Submission	ı   □ Substitution   □ Cancellation	│ □ Previously Submitted − No Change
Name			
Job Title		* Company	
Address			
Address City	* State/Province	* Zip/Postal Code	* Country
Job Title Address City Email	* State/Province		* Country
Address City Email	* State/Province	* Zip/Postal Code	* Country
Address City Email I Substituting for Your consent is important. We manage your p	personal data responsibly.	* Zip/Postal Code * Business Phone	,
Address City	personal data responsibly.	* Zip/Postal Code * Business Phone	,
Address City Email I Substituting for Your consent is important. We manage your page 1900 to 1	personal data responsibly. Insent to my personal data being shared as detaile	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply wit	th PDA rules an regulations.
Address  City  Email  Substituting for  Cour consent is important. We manage your part of the second	personal data responsibly. Insent to my personal data being shared as detaile	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply wit	th PDA rules an regulations.
Address  City  Email  Substituting for  Your consent is important. We manage your presponse REQUIRED = By checking the box, I co	personal data responsibly. Insent to my personal data being shared as detaile	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply wit	th PDA rules an regulations.
Address City Email 1 Substituting for Cour consent is important. We manage your page 1 to 1 t	personal data responsibly. Insent to my personal data being shared as detaile	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply wit	th PDA rules an regulations.
Address  City  Email  Substituting for  Cour consent is important. We manage your particles of the box, I complete the box of the bo	personal data responsibly. Insent to my personal data being shared as detaile ect One (required):   New Submission	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company	th PDA rules an regulations.    □ Previously Submitted – No Change
Address City Email I Substituting for Cour consent is important. We manage your part is supported to the substituting the box, I courseld the substituting the box, I courseld the substitution of the substit	personal data responsibly. Insent to my personal data being shared as detaile	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code	th PDA rules an regulations.
Address City Email I Substituting for Our consent is important. We manage your p ESPONSE REQUIRED * - By checking the box, I co Complimentary Exhibit Only Pass Sel Name Job Title Address City Email	personal data responsibly. Insent to my personal data being shared as detaile ect One (required):   New Submission	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company	th PDA rules an regulations.    □ Previously Submitted – No Change
Address City Email I Substituting for our consent is important. We manage your pesponse required \( \text{The Manage Your Pass Selection} \) Complimentary Exhibit Only Pass Selection Name Job Title Address City Email I Substituting for	personal data responsibly. Insent to my personal data being shared as detaile ect One (required):   * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code	th PDA rules an regulations.    □ Previously Submitted – No Change
Address City Email I Substituting for our consent is important. We manage your pesponse required \( \text{The Manage Your Pass Selection} \) Complimentary Exhibit Only Pass Selection Name Job Title Address City Email I Substituting for our consent is important. We manage your personal substituting for	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  Dersonal data responsibly.	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
Address City Email I Substituting for Cour consent is important. We manage your presponse REQUIRED * - By checking the box, I court consent is important. We manage your presponse REQUIRED * - By checking the box, I court consent is important. We manage your present is important. We manage your present is important. We manage your present is important.	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  Dersonal data responsibly.	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
Address City Email Substituting for our consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box is a second by the	personal data responsibly.  posent to my personal data being shared as detailed  ect One (required):   * State/Province  Personal data responsibly.  Personal data responsibly.  Personal data responsibly.  Personal data being shared as detailed	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with	th PDA rules an regulations.
Address City Email Substituting for Our consent is important. We manage your passed by the box, I complimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your passed by the box, I complimentary Exhibit Only Pass Sel City Email Substituting for Our consent is important. We manage your passed by the box, I complimentary Exhibit Only Pass Sel	personal data responsibly.  posent to my personal data being shared as detailed  ect One (required):   * State/Province  Personal data responsibly.  Personal data responsibly.  Personal data responsibly.  Personal data being shared as detailed	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with	th PDA rules an regulations.
Address City Email I Substituting for our consent is important. We manage your passed by the state of the sta	personal data responsibly.  posent to my personal data being shared as detailed  ect One (required):   * State/Province  Personal data responsibly.  Personal data responsibly.  Personal data responsibly.  Personal data being shared as detailed	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation   Cancellation	th PDA rules an regulations.
Address City Email I Substituting for our consent is important. We manage your pesponse required \( \text{The Manage Your Pesponse Required } \) Complimentary Exhibit Only Pass Sel Name Job Title Address City Email I Substituting for our consent is important. We manage your pesponse required \( \text{The Manage Your Pesponse Required } \) Complimentary Exhibit Only Pass Sel Name Job Title	personal data responsibly.  posent to my personal data being shared as detailed  ect One (required):   * State/Province  Personal data responsibly.  Personal data responsibly.  Personal data responsibly.  Personal data being shared as detailed	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with	th PDA rules an regulations.
Address City Email Substituting for Our consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box of the bo	personal data responsibly.  posent to my personal data being shared as detailed  ect One (required):   * State/Province  Personal data responsibly.  Personal data responsibly.  Personal data responsibly.  Personal data being shared as detailed	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation   Cancellation	th PDA rules an regulations.
City Email Substituting for Our consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box is important. We manage your passed by the box is important. We manage your passed by the box is important. We manage your passed by the box is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent is important. We manage your passed by the box is consent in the box is co	ect One (required):   * State/Province  * State/Province  personal data responsibly.  * State Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation   Cancellation	th PDA rules an regulations.
City  Email  Substituting for  our consent is important. We manage your part of the second of the se	ect One (required):   * State/Province  * State/Province  personal data responsibly.  * State Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation  * Company  * Zip/Postal Code	th PDA rules an regulations.
City Email   Substituting for   Substituting for   Substituting for   Substituting for   Substituting for     Substituting for     Complimentary Exhibit Only Pass Selection   Name     Job Title     Address     City     Email     Substituting for     Substituting for     Complimentary Exhibit Only Pass Selection     Substituting for     Complimentary Exhibit Only Pass Selection     Name     Job Title     Address     City     Email     Substituting for     Substituting	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation  * Company  * Zip/Postal Code	th PDA rules an regulations.
Address City Email Substituting for Our consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box, I consent is important. We manage your passed by the box is a consent is	personal data responsibly.  consent to my personal data being shared as detailed  ect One (required):   * State/Province  * State/Province  * State/Province  * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation  * Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email Substituting for Our consent is important. We manage your pesponse REQUIRED   * - By checking the box, I co Ocomplimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your pesponse REQUIRED   * - By checking the box, I co Ocomplimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Ocomplimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your pesponse Required to the period of the period o	personal data responsibly.  consent to my personal data being shared as detailed  ect One (required):   * State/Province  * State/Province  * State/Province  * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Cancellation  * Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
Address City Email   Substituting for  our consent is important. We manage your perpension of the box, I complimentary Exhibit Only Pass Sel Name   Job Title	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email  I Substituting for  Cour consent is important. We manage your perpension of the box, I coursely be substituting for  Complimentary Exhibit Only Pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Cour consent is important. We manage your perpension of the box, I coursely be substituted by the box, I coursely be substituted by the box of the bo	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email   Substituting for   Substituting for   Substituting for     Substituting for     Complimentary Exhibit Only Pass Sel   Name     Job Title     Address     City     Email     Substituting for     Substituting for     Our consent is important. We manage your pass     ESPONSE REQUIRED   - By checking the box, I complimentary Exhibit Only Pass Sel   Name     Job Title     Address     City     Email     Substituting for     Our consent is important. We manage your pass     Substituting for     Our consent is important. We manage your pass     ESPONSE REQUIRED   - By checking the box, I complimentary Exhibit Only Pass	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email  I Substituting for  Our consent is important. We manage your part of the box, I complimentary Exhibit Only Pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Our consent is important. We manage your part of the box, I complimentary Exhibit Only Pass Sel  Name  Job Title  Complimentary Exhibit Only Pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Our consent is important. We manage your pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Our consent is important. We manage your pass Sel  Substituting for  Our consent is important. We manage your pass Sel  Substituting for  Our consent is important. We manage your pass Sel  Complimentary Exhibit Only Pass Sel  Name  Job Title	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email Substituting for Cour consent is important. We manage your personner is important. We	personal data responsibly. ect One (required):  New Submission  * State/Province  * State/Province  personal data responsibly. ect One (required):  New Submission  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email Substituting for Our consent is important. We manage your perpendicular to the box, I complimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your perpendicular to the box, I complimentary Exhibit Only Pass Sel Name Job Title Complimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your perpendicular to the box, I complimentary Exhibit Only Pass Sel Name Job Title Address City Email Substituting for Our consent is important. We manage your perpendicular to the box, I complimentary Exhibit Only Pass Sel Name Job Title Address City Complimentary Exhibit Only Pass Sel Name Job Title Address City	personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  personal data responsibly. Insent to my personal data being shared as detailed ect One (required):   * State/Province  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.
City Email  I Substituting for  Cour consent is important. We manage your part of the box, I coursely substituting for  Complimentary Exhibit Only Pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Cour consent is important. We manage your part of the box, I coursely substituting for  Complimentary Exhibit Only Pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Cour consent is important. We manage your pass Sel  Name  Job Title  Address  City  Email  I Substituting for  Cour consent is important. We manage your pass Sel  Substituting for  Cour consent is important. We manage your pass Sel  Cour consent is important. We manage your pass Sel  Cour consent is important. We manage your pass Sel  Complimentary Exhibit Only Pass Sel  Name  Job Title	personal data responsibly. ect One (required):  New Submission  * State/Province  * State/Province  personal data responsibly. ect One (required):  New Submission  * State/Province  * State/Province	* Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Substitution   Cancellation  * Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone  d in the gray box below and agree to comply with Company  * Zip/Postal Code  * Business Phone	th PDA rules an regulations.

<sup>\*</sup>I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via email.



# **PDA WEEK 2025** COMPLIMENTARY EXHIBIT PACKAGE REGISTRATION FORM — 30' x 10' BOOTH SIZE EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Complimentary Full Conference Pass Information for 30' x 10' booth: Your booth Package includes 3 complimentary Full Conference Passes and 6 complimentary Exhibit Only Passes. Confirmations a e sent directly to the registration emails provided on this form. To purchase additional Full Conference Passes, use the Additional Badge Request Order Form. Your registrations must be submitted by 03 February. A \$50 penalty will be applied for submissions/substitutions after this date.

Access to all conforces access Edition	asses		
Access to all conference sessions, Exhibit F purchase a standard Full Conference pass co-presenter submissions. *REQUIRED FIELDS	s. The Full Conference pass incl		<b>OR CO-PRESENTERS</b> are required to ot qualify for poster presenter or
Complimentary Full Conference Pass Selection		sion   □ Substitution   □ Cancellat	ion   □ Previously Submitted – No Change
* Name * Job Title		* Company	
* Address			
* City * Email	* State/Province	* Zip/Postal Code  * Business Phone	* Country
□ Substituting for			
Your consent is important. We manage your perso RESPONSE REQUIRED □* – By checking the box, I consent		ed in the gray box below and agree to comply w	ith PDA rules an regulations.
Complimentary Full Conference Pass Selection * Name	ct One (required):   New Submiss	sion   🗆 Substitution   🗅 Cancellat	ion   □ Previously Submitted – No Change
* Job Title		* Company	
* Address * City	* State/Province	* Zip/Postal Code	* Country
* Email  ☐ Substituting for		* Business Phone	
Your consent is important. We manage your perso RESPONSE REQUIRED □* – By checking the box, I consent		ed in the gray box below and agree to comply w	ith PDA rules an regulations.
Complimentary Full Conference Pass Selection	ct One (required):   New Submis	sion   □ Substitution   □ Cancellat	ion   □ Previously Submitted - No Change
* Name		<b>*</b> O	
* Job Title * Address		* Company	
* City * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country
□ Substituting for		Submicoo i Holic	
Your consent is important. We manage your perso RESPONSE REQUIRED □* – By checking the box, I consent		ed in the gray box below and agree to comply w	ith PDA rules an regulations.
Complimentary Exhibit Only Passe			and the state of t
Access to Exhibit Hall, Poster Presentations standard Full Conference pass. The Full Conference pass.			
submissions.*REQUIRED FIELDS  O Complimentary Exhibit Only Pass Select C	One (required): ☐ New Submission	n   □ Substitution   □ Cancellation	│ □ Previously Submitted − No Change
* Name		+0	
* Job Title * Address		* Company	
* City * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country
□ Substituting for		" Dusilless Filotie	
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent		ed in the gray box below and agree to comply w	ith PDA rules an regulations.
2 Complimentary Exhibit Only Pass Select C	One (required): ☐ New Submission	n   □ Substitution   □ Cancellation	│ □ Previously Submitted − No Change
* Name  * Job Title		* Company	
* Address		, ,	
* City	# O1 1 /D :	# 7' (D + 10 1	1.0
* Email	* State/Province	* Zip/Postal Code * Business Phone	* Country
☐ Substituting for		<u> </u>	* Country
☐ Substituting for  Your consent is important. We manage your perso	onal data responsibly.	* Business Phone	, 
□ Substituting for  Your consent is important. We manage your perso RESPONSE REQUIRED □* – By checking the box, I consent  © Complimentary Exhibit Only Pass Select C	onal data responsibly. t to my personal data being shared as detaile	* Business Phone  ed in the gray box below and agree to comply w	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your perso RESPONSE REQUIRED □* – By checking the box, I consent  © Complimentary Exhibit Only Pass Select C  * Name	onal data responsibly. t to my personal data being shared as detaile	* Business Phone  ed in the gray box below and agree to comply w	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Consent  * Name  * Job Title  * Address	onal data responsibly. It to my personal data being shared as detaile One (required):   New Submission	* Business Phone  * Business Phone  * d in the gray box below and agree to comply we have a comply we have a comply we have a complete to comply we have a complete to comply we have a complete to co	ith PDA rules an regulations.    □ Previously Submitted – No Change
Your consent is important. We manage your person RESPONSE REQUIRED   * - By checking the box, I consent   Complimentary Exhibit Only Pass Select Consent   * Name   * Job Title   * Address	onal data responsibly. t to my personal data being shared as detaile	* Business Phone  ed in the gray box below and agree to comply w  n   □ Substitution   □ Cancellation	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Compl	onal data responsibly.  It to my personal data being shared as detailed  One (required):   New Submission  * State/Province	* Business Phone  ed in the gray box below and agree to comply we need to gray be agreed in the gray box below and agree to comply we need to gray be agreed in the gray box below and agree to comply we need to gray be agreed to gray	ith PDA rules an regulations.    □ Previously Submitted – No Change
Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Cooks Name  * Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your person	onal data responsibly.  It to my personal data being shared as detailed  One (required):   * State/Province  onal data responsibly.	* Business Phone  ed in the gray box below and agree to comply we note that the gray box below and agree the gray box below and agree to comply we note that the gray box below and agree to comply we note that the gray box below and agree to comply we note that the gray box below and agree to comply we note that the gray box below and agree the	ith PDA rules an regulations.  ☐ Previously Submitted — No Change  * Country
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Complimentary Exhibit Only Pass Select Consent  Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Complimentary Exhibit Only Pass Select Consent  Complimentary Exhibit Only Pass Select Consent	onal data responsibly.  It to my personal data being shared as detailed  One (required):   * State/Province  onal data responsibly.  It to my personal data being shared as detailed	* Business Phone  ed in the gray box below and agree to comply we note that the gray below and agree to comply we note that the gray box below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below	ith PDA rules an regulations.    □ Previously Submitted - No Change  * Country  ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Consent  * Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Consent  * Name  * Job Title	onal data responsibly.  It to my personal data being shared as detailed  One (required):   * State/Province  onal data responsibly.  It to my personal data being shared as detailed	* Business Phone  ed in the gray box below and agree to comply we note that the gray below and agree to comply we note that the gray box below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Complimentary Exhibit Only Pass Select Complex Exhibit Only Pass Select Comple	onal data responsibly.  It to my personal data being shared as detailed  One (required):   * State/Province  onal data responsibly.  It to my personal data being shared as detailed	* Business Phone  ed in the gray box below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray below and agree to comply we note that the gray b	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent  © Complimentary Exhibit Only Pass Select Complex	onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission  * State/Province  onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission	*Business Phone  *Business Phone  *In the gray box below and agree to comply we can be company  *Company  *Zip/Postal Code  *Business Phone  *Business Phone  *Company and agree to comply we can be comply we can be company  *Company	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  * Complimentary Exhibit Only Pass Select Complex Select C	onal data responsibly.  It to my personal data being shared as detailed  One (required):   * State/Province  onal data responsibly.  It to my personal data being shared as detailed  One (required):   New Submission  * State/Province  * State/Province	*Business Phone  *Business Phone  *In the gray box below and agree to comply we company  *Company  *Zip/Postal Code  *Business Phone  *Company  *Company  *Company  *Zip/Postal Code  *Business Phone	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Somplimentary Exhibit Only Pass Select Consent  Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  * Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your person Select Consent  * Name  * Job Title  * Address  * City  * Email  □ Substituting for  Your consent is important. We manage your person Select Consent  * Substituting for  Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important. We manage your person Select Consent  * Your consent is important Your your your your your your your your y	onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission  * State/Province  onal data responsibly.  It to my personal data being shared as detailed  * State/Province  * State/Province  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone  ed in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  * Complimentary Exhibit Only Pass Select Complimentary Exhibit Only P	onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission  * State/Province  onal data responsibly.  It to my personal data being shared as detailed  * State/Province  * State/Province  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone  ed in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent Only Pass Select Consent Name  * Job Title  * Address  * City  * Email □ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent Name  * Job Title  * Address  * City  * Email □ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent Name  * Job Title  * Address  * City  * Email □ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent Name  * Complimentary Exhibit Only Pass Select Consent Name  * Job Title	onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission  * State/Province  onal data responsibly.  It to my personal data being shared as detailed  * State/Province  * State/Province  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone  ed in the gray box below and agree to comply we had a substitution   □ Cancellation    * Company  * Zip/Postal Code  * Business Phone	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent Select Complimentary Exhibit Only Pass Select Complex Exhibit Only Pas	onal data responsibly.  It to my personal data being shared as detailed  One (required): □ New Submission  * State/Province  onal data responsibly.  It to my personal data being shared as detailed  * State/Province  * State/Province  * State/Province	*Business Phone  ed in the gray box below and agree to comply we had in the gray box b	ith PDA rules an regulations.
Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent is important. We manage your person is important. We manage your person is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent is important. We manage your person is important. We	onal data responsibly.  It to my personal data being shared as detailed.  * State/Province  * State/Province  * State/Province  The province on the personal data being shared as detailed.  * State/Province	*Business Phone  ed in the gray box below and agree to comply we had in the gray box b	ith PDA rules an regulations.
Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Omplimentary Exhibit Only Pass Select Consent  Name  Name  Address  City  Email  Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Name  Job Title  Address  City  Email  Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Name  Job Title  Address  City  Email  Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Name  Job Title  Address  City  Email  Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Name  Job Title  Address  City  Email  Substituting for  Your consent is important. We manage your person Responsible is important. We manage your person Responsible is important. We manage your person Your consent is important. Your consent is important. Your consent is important. Your consent your perso	onal data responsibly.  It to my personal data being shared as detailed  The required in the state of the sta	*Business Phone  ed in the gray box below and agree to comply we had in the gray box b	ith PDA rules an regulations.
Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substitution of t	onal data responsibly.  t to my personal data being shared as detailed.  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box	ith PDA rules an regulations.
Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  Complimentary Exhibit Only Pass Select Complementary Exhibit Only Pass Select Complementar	onal data responsibly.  t to my personal data being shared as detailed.  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substituting for Your consent is important. Ye manage your person RESPONSE REQUIRED □* - By checking the box, I consent to the substitution ye had yet	onal data responsibly.  t to my personal data being shared as detailed.  * State/Province	* Business Phone  ed in the gray box below and agree to comply we had in the gray box	ith PDA rules an regulations.
□ Substituting for  Your consent is important. We manage your personous RESPONSE REQUIRED □* - By checking the box, I consent to the box of th	onal data responsibly.  t to my personal data being shared as detailed.  * State/Province	*Business Phone  ed in the gray box below and agree to comply we had in the gray box b	ith PDA rules an regulations.
Substituting for  Your consent is important. We manage your person RESPONSE REQUIRED □* - By checking the box, I consent  * Complimentary Exhibit Only Pass Select Complex Se	onal data responsibly.  t to my personal data being shared as detailed.  * State/Province	*Business Phone  ed in the gray box below and agree to comply we had in the gray box b	ith PDA rules an regulations.

\*I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

RESPONSE REQUIRED - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

For more information, contact David Hall at + 1 (240) 688-4405 or hall@pda.org or Alison Caballero at +1 (301) 656-5900 or caballero@pda.org.



# PDA WEEK 2025 COMPLIMENTARY REGISTRATION ORDER FORM – 20' x 20' OR 40' x 10' BOOTH SIZE

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Complimentary Full Conference Pass Information for 20' x 20' or 40' x 10' booth: Your booth Package includes 4 complimentary Full Conference Passes and 8 complimentary Exhibit Only Passes. Confirmations a e sent directly to the registration emails provided on this form. To purchase

penalty will be applied for submissions/subst	•	er Form. Your registrations must be	e submitted by <b>U3 February</b> . A \$50	
Complimentary Full Conference Passe	es			
Access to all conference sessions, Exhibit Hall, purchase a standard Full Conference pass. The			•	
presenter submissions. *REQUIRED FIELDS  Ocupation   Complimentary Full Conference Pass Select Of the Select Of th	ne (required): □ New Submiss	ion ↓ □ Substitution ↓ □ Cancellation	n I □ Previously Submitted – No Change	
* Name	The (required). In New Outstilloo		T T Teviously outstitted The origing.	
* Job Title  * Address		* Company		
* City  * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
□ Substituting for  Your consent is important. We manage your personal of				
RESPONSE REQUIRED □* – By checking the box, I consent to m	y personal data being shared as detailed	l in the gray box below and agree to comply with	PDA rules an regulations.	
<ul><li> Complimentary Full Conference Pass Select On</li><li>* Name</li></ul>	ne (required): ☐ New Submiss	ion   □ Substitution   □ Cancellatior	n   🗆 Previously Submitted – No Chango	
* Job Title * Address		* Company		
* City * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
☐ Substituting for  Your consent is important. We manage your personal of	data raenansihly			
RESPONSE REQUIRED □* – By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
Complimentary Full Conference Pass Select On the Page 19	ne (required): ☐ New Submiss	ion   □ Substitution   □ Cancellation	n   □ Previously Submitted – No Change	
* Name  * Job Title		* Company		
* Address  * City  * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
☐ Substituting for		" Dusilless Filolie		
Your consent is important. We manage your personal of RESPONSE REQUIRED □* – By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
Complimentary Full Conference Pass Select On	ne (required): □ New Submiss	ion   □ Substitution   □ Cancellation	n   □ Previously Submitted – No Change	
* Name * Job Title		* Company		
* Address * City	* State/Province	* Zip/Postal Code	* Country	
* Email  ☐ Substituting for		* Business Phone		
Your consent is important. We manage your personal of RESPONSE REQUIRED □* − By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
<b>Complimentary Exhibit Only Passes</b>				
Access to Exhibit Hall, Poster Presentations, an standard Full Conference pass. The Full Confe			·	
submissions.*REQUIRED FIELDS  Complimentary Exhibit Only Pass Select One	(required):	□ Cubatitution □ □ Cancellation □	□ Provioualy Submitted - No Change	
* Name	(required). If New Subinission		Differentially Submitted in Change	
* Job Title  * Address		* Company		
* City  * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
Substituting for  Your consent is important. We manage your personal of	- · · · · · · · · · · · · · · · · · · ·			
RESPONSE REQUIRED □* – By checking the box, I consent to m				
<ul><li> Complimentary Exhibit Only Pass Select One (</li><li>* Name</li></ul>	(required): ☐ New Submission	□ Substitution   □ Cancellation	☐ Previously Submitted – No Change	
* Job Title  * Address		* Company		
* City * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
☐ Substituting for  Your consent is important. We manage your personal of	data responsibly.			
RESPONSE REQUIRED □* - By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
<ul><li>Complimentary Exhibit Only Pass Select One</li><li>* Name</li></ul>	(required): ☐ New Submission	□ Substitution   □ Cancellation	☐ Previously Submitted – No Change	
* Job Title * Address		* Company		
* City * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
☐ Substituting for  Your consent is important. We manage your personal of	data resnonsihly			
RESPONSE REQUIRED □* – By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
<ul><li>Complimentary Exhibit Only Pass Select One</li><li>* Name</li></ul>	(required):   New Submission	$  \square$ Substitution $  \square$ Cancellation $ $	☐ Previously Submitted – No Change	
* Job Title  * Address		* Company		
* City  * Email	* State/Province	* Zip/Postal Code * Business Phone	* Country	
□ Substituting for		" Dusilless Filolie		
Your consent is important. We manage your personal of RESPONSE REQUIRED □* – By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
<b>6</b> Complimentary Exhibit Only Pass Select One	(required): ☐ New Submission	$  \; \square$ Substitution $  \; \square$ Cancellation $  \;$	☐ Previously Submitted – No Change	
* Name  * Job Title		* Company		
* Address * City	* State/Province	* Zip/Postal Code	* Country	
* Email  ☐ Substituting for		* Business Phone		
Your consent is important. We manage your personal of RESPONSE REQUIRED □* – By checking the box, I consent to m		l in the gray box below and agree to comply with	PDA rules an regulations.	
© Complimentary Exhibit Only Pass Select One	(required): □ New Submission	□ Substitution   □ Cancellation	☐ Previously Submitted – No Change	
* Name * Job Title		* Company		
* Address * City	* State/Province	* Zip/Postal Code	* Country	
* Email		* Business Phone	•	
Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED   * - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.				
© Complimentary Exhibit Only Pass Select One (required): ☐ New Submission   ☐ Substitution   ☐ Cancellation   ☐ Previously Submitted - No Change				
* Name  * Job Title	, 223351311	* Company	,	
* Address	* C+a+a / Ducuino		* Co*	
* City  * Email  □ Substituting for	* State/Province	* Zip/Postal Code * Business Phone	* Country	

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

<b>3 Complimentary Exhibit Only Pass</b>	<b>Select One (required):</b> □ New Submission	$_{ m I}$ $\mid$ $\square$ Substitution $\mid$ $\square$ Cancellation	n │ □ Previously Submitted − No Change
* Name			
* Job Title		* Company	
* Address			
* City	* State/Province	* Zip/Postal Code	* Country
* Email		* Business Phone	
☐ Substituting for			

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via email.

<sup>\*</sup>I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors.



### **PDA WEEK 2025** COMPLIMENTARY FULL CONFERENCE PASS REGISTRATION FORM - SPONSORS ONLY

**EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA** 

Complimentary Full Conference Pass Information: Your Exhibit Package level determines your number of complimentary Full Conference Passes. To purchase additional Full Conference Passes, use the Additional Full Conference Pass Request Form. Confirmations a e sent directly to the registration emails provided on this form.

□ **DIAMOND SPONSOR** (includes 4 Full Conference Passes and 4 Exhibit Only Passes.) □ PLATINUM SPONSOR (includes 3 Full Conference Passes and 3 Exhibit Only Passes.) **SELECT** ☐ **GOLD SPONSOR** (includes 2 Full Conference Passes and 3 Exhibit Only Passes.) **ONE\*** ☐ **SILVER SPONSOR** (includes 1 Full Conference Pass and 3 Exhibit Only Passes.) ☐ **BRONZE SPONSOR** (includes 1 Full Conference Pass and 2 Exhibit Only Passes.) □ **CUSTOM BADGES** (includes **X** Full Conference Pass and **X** Exhibit Only Pass.)

# **Complimentary Full Conference Passes**

Access to all conference sessions, Exhibit Hall, Poster Presentations, and Tech Talks. POSTER PRESENTERS OR CO-PRESENTERS are required to purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or co-presenter submissions. \*REQUIRED FIELDS

• Complimentary Full Conference Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted – No Change \* Name

\* Job Title \* Company \* Address \* City \* Zip/Postal Code \* State/Province \* Country \* Business Phone \* Email ☐ Substituting for

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

② Complimentary Full Conference Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

☐ Substituting for

© Complimentary Full Conference Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name

\* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Ocomplimentary Full Conference Pass Select One (required): ☐ New Submission ☐ Substitution ☐ Cancellation ☐ Previously Submitted — No Change \* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Email \* Business Phone ☐ Substituting for

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

⑤ Complimentary Full Conference Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name \* Job Title \* Company \* Address

\* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly.

© Complimentary Full Conference Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Name \* Job Title \* Company \* Address \* State/Province \* City \* Zip/Postal Code \* Country \* Email \* Business Phone □ Substituting for

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Your consent is important. We manage your personal data responsibly.

### Access to Exhibit Hall, Poster Presentations, and Tech Talks. **POSTER PRESENTERS OR CO-PRESENTERS** are required to purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or co-presenter

**Complimentary Exhibit Only Passes** 

submissions.\*REQUIRED FIELDS • Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED \* - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

② Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Business Phone \* Email □ Substituting for Your consent is important. We manage your personal data responsibly.

⑤ Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Job Title \* Company \* Address \* City \* Zip/Postal Code \* State/Province \* Country \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Ocomplimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name

\* Job Title \* Company \* Address \* Country \* City \* State/Province \* Zip/Postal Code \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

⑤ Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title \* Company \* Address \* Zip/Postal Code \* Country \* City \* State/Province \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

© Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title \* Company

\* Address \* City \* Zip/Postal Code \* Country \* State/Province \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED 🗆 \* - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Name \* Job Title

**® Complimentary Exhibit Only Pass** Select One (required): □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted - No Change \* Company

\* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations. © Complimentary Exhibit Only Pass Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title

\* Company \* Address \* Zip/Postal Code \* City \* State/Province \* Country

\* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations. © Complimentary Exhibit Only Pass Select One (required): □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted - No Change

\* Company

\* Name \* Job Title

Your consent is important. We manage your personal data responsibly.

☐ Substituting for

\* Address \* Country \* City \* State/Province \* Zip/Postal Code \* Business Phone \* Email

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\*I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

For more information, contact David Hall at + 1 (240) 688-4405 or hall@pda.org or Alison Caballero at +1 (301) 656-5900 or caballero@pda.org.



Additional Full Conference Pass Request: Submit the contact details for each registrant. Badges can be picked up onsite on Monday, 07 April. Confirmations a e sent directly to the registration emails provided on this form. POSTER PRESENTERS OR CO-PRESENTERS are required to purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or copresenter submissions. Membership status will be verified upon egistration. \*REQUIRED FIELDS

Additional Full Conference Passes: Select your option for registration.

OPTION 2: Group Rate | Buy 3 and Get the 4th Free Register 3 people from the same organization for the event at the same time **OPTION 1: Single Full Conference Pass Request with 10% Discount** and receive the 4th registration free. Other discounts and existing registrations cannot be applied. (Price is based on prevailing standard rate. Cannot combine with other registration discounts including the 10% on additional individual passes.) Rate before 03 FEB. 2025 Rate before 03 FEB. 2025 ☐ Member \$X,XXX ☐ Non-Member \$X,XXX ☐ Member \$X,XXX ☐ Non-Member \$X,XXX Rate after 03 FEB. 2025 Rate after 03 FEB. 2025 ☐ Member \$X,XXX ☐ Non-Member \$X,XXX ☐ Member \$X,XXX ☐ Non-Member \$X,XXX One single payment type is required to qualify for the group rate. Single Pass Rate with 10% discount Only submit 1 form for all registration requests.

To receive confirmations payment is required. Invoices will be sent directly to each registrant on individual requests.

**Group Rate** Only submit 1 form for your registration request. To receive confirmation(s) 1 single payment is required along with the information of 1 POC. Provide details in payment section.

• Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted – No Change

### **Additional Full Conference Passes** Access to all conference sessions, Exhibit Hall, Poster Presentations, and Tech Talks. POSTER PRESENTERS OR CO-PRESENTERS are required to

purchase a standard Full Conference pass. The Full Conference pass included with booth package does not qualify for poster presenter or co-presenter submissions. \*REQUIRED FIELDS

\* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED 🗆 \* - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

② Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change \* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for

Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title \* Company \* Address \* City \* Zip/Postal Code \* State/Province \* Country \* Email \* Business Phone

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Your consent is important. We manage your personal data responsibly.

☐ Substituting for

\* Name

\* Job Title

\* Job Title

◆ Select One (required): □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted – No Change

\* Name \* Job Title \* Company \* Address \* City \* Zip/Postal Code \* State/Province \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly.

⑤ Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly.

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

⑤ Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly.

Select One (required): □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted - No Change

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

\* Company

 Select One (required): □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted – No Change \* Name

\* Company \* Job Title \* Address \* Country \* City \* State/Province \* Zip/Postal Code \* Email \* Business Phone □ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED \* - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Select One (required): ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted - No Change

\* Name \* Job Title \* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for

RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

Your consent is important. We manage your personal data responsibly.

**Select One (required):** ☐ New Submission | ☐ Substitution | ☐ Cancellation | ☐ Previously Submitted – No Change \* Name

\* Company \* Address \* City \* State/Province \* Zip/Postal Code \* Country \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

**® Select One (required):** □ New Submission | □ Substitution | □ Cancellation | □ Previously Submitted – No Change \* Name

\* Job Title \* Company \* Address \* City \* Country \* Zip/Postal Code \* State/Province \* Email \* Business Phone ☐ Substituting for Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED - - By checking the box, I consent to my personal data being shared as detailed in the gray box below and agree to comply with PDA rules an regulations.

a. Locate the login button found at the top right corner

Select My Account located in drop -down menu beside

beside the billing address fiel

of the page

person icon

**Group Registration POC Contact Details:** Provide the details below to receive the invoice/order confirmation. Regist ations are processed within 3-5 business days.:

\* Name \* Job Title \* Company \* Address \* City \* Country \* State/Zip \* Email **Payment Options** 

☐ By Credit Card □ By ACH or Bank Transfer **Truist Bank** For secure processing of credit card payments, please follow

All company checks, or bank draft payments are to be made payable in U.S. dollars (\$USD) to: 214 North Tryon Street instructions to pay via https://www.pda.org/my-account\* Charlotte, NC 28202 Parenteral Drug Association or PDA Log into pda.org with your PDA USER ID and Password. Account Name: Parenteral Drug Association and payable via a U.S. Bank If you need your login details connect with our registration Account Number: 209364254 team at registration@pda.org ABA Routing Number: 061000104

SWIFT Bank Code: BRBTUS33

□ PDA Payment Terms: Net 30

- Purchase Order (send a copy of the purchase order to a. Click on link: Make a payment to an open order nentcheva@pda.org) b. Look for invoice to pay and select Pay Now button 3 Confirm our credit card's billing address a. To change billing address, select Change button located
  - b. To add a new address, select link: Click here to add new address then select Add Address button c. If the credit card billing address is changed select button
- P.O. Box 79465 Baltimore, MD 21279 -0465 USA Checks sent via USPS should be mailed to: P.O. Box 79465

Checks sent via courier or delivery service (e.g. FEDEX, UPS, DHL) should be mailed to: PDA c/o Truist Bank Lockbox 79465 1000 Stewart Avenue Glen Burnie, MD 21061 USA

Baltimore, MD 21279 -0465, USA

Use address Enter payment information in the space provided 6 Click Complete Order button to make payment Number

\*I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

For more information, contact David Hall at + 1 (240) 688-4405 or hall@pda.org or Alison Caballero at +1 (301) 656-5900 or caballero@pda.org.



# PDA WEEK 2025 ADDITIONAL EXHIBIT ONLY PASS REQUEST FORM

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

**Additional Exhibit Only Pass Request:** Submit the contact details for each registrant. The Exhibit Only Pass allows for access to the Exhibit Hall only. \*REQUIRED FIELDS

□ Exhibit Only Pass - \$700 Access to the Exhibit Hall, Posters, and Tech Talks. No access to Plenary or Concurrent sessions. Confirmations are sent directly to the registration emails provided on this form. (10% discount cannot be applied to Exhibit Only Pass requests)

Additional Exhibit Only Passes					
Access to Exhibit Hall, Poster Presentations, and Tech	Talks. <b>POSTER PRESENTERS O</b>	R CO-PRESENTERS are required to purchase a standard			
Full Conference pass. The Full Conference pass inclu* *REQUIRED FIELDS	uded with booth package does n	ot qualify for poster presenter or co-presenter submissions.			
Select One (required): □ New Submission   □ Substit	ution   🗆 Cancellation   🗖 Previou	usly Submitted – No Change			
* Name					
* Job Title					
* Company					
* Address					
* City		ate/Zip			
* Email	* Bu	usiness Phone			
Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED   * - By checking the box, I consent to my personal data being shared as detailed in the gray box below.					
Select One (required): ☐ New Submission   ☐ Substit	ution $  \square$ Cancellation $  \square$ Previou	usly Submitted – No Change			
* Name					
* Job Title					
* Company					
* Address	+ C+	ata/7in			
* City * Email		ate/Zip usiness Phone			
□ Substituting for	DC	Isliness Filone			
Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED □* − By checking the box, I consent to my personal data being shared as detailed in the gray box below.					
<b>Select One (required):</b> □ New Submission   □ Substit	ution   🗆 Cancellation   🗅 Previou	usly Submitted – No Change			
* Name					
* Job Title					
* Company  * Address					
* City	* \$1	ate/Zip			
* Email		usiness Phone			
□ Substituting for					
Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED   * - By checking the box, I consent to my personal data being shared as detailed in the gray box below.					
Select One (required): □ New Submission   □ Substit     *Name	ution   Li Cancellation   Li Pieviot	usiy Submitted – No Change			
* Job Title					
* Company					
* Address					
* City		ate/Zip			
* Email	* Ві	usiness Phone			
Substituting for  Your consent is important. We manage your personal data responsibly.  RESPONSE REQUIRED □* − By checking the box, I consent to my personal data being shared as detailed in the gray box below.					
Registration POC Contact Details For Invoicing:  Provide the details below to receive the invoice/order confirmation. Regist ations are processed within 3-5 business days.  * Name					
* Job Title					
* Company					
* Address					
* City  * Email	* State/Zip	* Country			

### **Payment Options**

☐ By Credit Card

For secure processing of credit card payments, please follow instructions to pay via https://www.pda.org/my-account\*

- Log into pda.org with your PDA USER ID and Password.
  If you need your login details connect with our registration team at registration@pda.org

   Logary the login button found at the top right corpor.
  - a. Locate the login button found at the top right corner of the page
- Select My Account located in drop -down menu beside person icon
- a. Click on link: Make a payment to an open order b. Look for invoice to pay and select Pay Now button
- Confirm our credit card's billing address
   a. To change billing address, select Change button located
  - a. To change billing address, select change button located beside the billing address fiel
  - b. To add a new address, select link: Click here to add new address then select Add Address button
  - c. If the credit card billing address is changed select button Use address
- Use addressEnter payment information in the space provided
- Enter payment information in the space providedClick Complete Order button to make payment Number

☐ By ACH or Bank Transfer Truist Bank

214 North Tryon Street Charlotte, NC 28202

Charlotte, NC 28202

Account Name: Parenteral Drug Association

Account Number: 209364254
ABA Routing Number: 061000104
SWIFT Bank Code: BRBTUS33

□ PDA Payment Terms: Net 30

Purchase Order (send a copy of the purchase order to nentcheva@pda.org)

### ☐ By Check

All company checks, or bank draft payments are to be made payable in U.S. dollars (\$USD) to: Parenteral Drug Association or PDA and payable via a U.S. Bank

PDA

P.O. Box 79465 Baltimore, MD 21279 -0465 USA

Checks sent via USPS should be mailed to:

P.O. Box 79465 Baltimore, MD 21279 -0465, USA

2 Checks sent via courier or delivery service (e.g. FEDEX, UPS, DHL) should be mailed to:

PDA c/o Truist Bank Lockbox 79465 1000 Stewar t Avenue Glen Burnie, MD 21061 USA

<sup>\*</sup>I consent to: My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.



\$3,900

Includes one full conference registration for your Tech Talk presenter

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

**Tech Talk Information:** Your sponsorship includes an opportunity to conduct a short, 10 minute presentation (Tech Talk) during the breaks or the extended lunch hour in the Exhibit Hall. You'll receive a time assignment in your Sponsor Confirmation email. We recommend your presentation introduce a new technology, service, or product to a targeted group of attendees. PDA will provide a microphone, small speaker, and monitor. The Tech Talk should be a maximum of ten minutes and we suggest allotting some of the time for Q&A.

\* Presenter Mobile Phone

Presenter/Presentation Information: Provide the details for your presenter. This information will be featured in the agenda, on the App and on event signage. \*REQUIRED FIELDS.

- \* Presenter First and Last Name
- \* Presenter Job Title
- \* Presenter Company
- \* Presenter Email
- \* Presentation Title (50 Characters Max)
- Title (50 Characters Max)

\* Presentation Description (200 Words Max. If your Adobe Acrobat is not compatible please send your details by Email.)

PDA will assign you a speaking slot upon completion of the tech talk sign up form. Space is limited.

Presenter/Presentation Registration: Your Tech Talk fee includes one full conference registration for your Tech Talk presenter.

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED – By checking the box below, I consent to:

☐ My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

### By registering for this meeting, you agree to abide by the PDA Code of Conduct.

### **Contact Person for Invoicing**

Name (exactly as it appears on card)		
Email Address		
Company		
Billing address (if different from above)		City
State/Province	Zip/Postal Code	Country

### **Payment Options**

### □ By Credit Card

For secure processing of credit card payments, please follow instructions to pay via https://www.pda.org/my-account\*

- Log into pda.org with your PDA USER ID and Password.
   If you need your login details connect with our registration team at registration@pda.org
  - a. Locate the login button found at the top right corner of the page
- Select My Account located in drop -down menu beside person icon
  - a. Click on link: Make a payment to an open order
  - b. Look for invoice to pay and select Pay Now button
- Onfirm our credit card's billing address
  - a. To change billing address, select Change button located beside the billing address fiel
  - b. To add a new address, select link: Click here to add new address then select Add Address button
  - c. If the credit card billing address is changed select button Use address
- 4 Enter payment information in the space provided
- 6 Click Complete Order button to make payment Number

### □ By ACH or Bank Transfer

Truist Bank

214 North Tryon Street Charlotte, NC 28202

Account Name: Parenteral Drug Association Account Number: 209364254 ABA Routing Number: 061000104 SWIFT Bank Code: BRBTUS33

□ PDA Payment Terms: Net 30

Purchase Order (send a copy of the purchase order to nentcheva@pda.org)

### ☐ By Check

All company checks, or bank draft payments are to be made payable in U.S. dollars (\$USD) to:
Parenteral Drug Association or PDA

and payable via a U.S. Bank

PDA

P.O. Box 79465

Baltimore, MD 21279 -0465 USA

Checks sent via USPS should be mailed to:

PDA

P.O. Box 79465 Baltimore, MD 21279 -0465, USA

2 Checks sent via courier or delivery service (e.g. FEDEX, UPS, DHL) should be mailed to:

PDA c/o Truist Bank Lockbox 79465 1000 Stewar t Avenue Glen Burnie, MD 21061 USA



### **PDA WEEK 2025**

## TECH TALK INFORMATION REQUEST FORM FOR SPONSORS

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

**Tech Talk Information:** PDA is offering a limited number of companies the opportunity to conduct a short, paid presentation (Tech Talk) during the breaks or the extended lunch hour in the Exhibit Hall. This is a cost-effective way to introduce a new technology, service, or product to a targeted group of attendees. PDA will provide a microphone, small speaker, and monitor. The Tech Talk should be a maximum of 10 minutes and we suggest allotting some of the time for Q&A. **If you wish to have a longer period, connect with the Sales Team.** 

Presenter/Presentation Information: Provide the details for your presenter. This information will be featured in the agenda, on the App and on event signage. \*REQUIRED FIELDS.

- \* Presenter First and Last Name
- \* Presenter Job Title
- \* Presenter Company
- \* Presenter Fmail
- \* Presenter Mobile Phone
- \* Presentation Title (50 Characters Max)
- \* Presentation Description (200 Words Max)

PDA will assign you a speaking slot upon completion of the tech talk form. Space is limited.

Presenter/Presentation Registration: Your presenter will need to be assigned one of your complimentary full conference badges or your complimentary exhibit only badge.

Your consent is important. We manage your personal data responsibly. RESPONSE REQUIRED – By checking the box below, I consent to:

☐ My contact information (name, company, job title, city, state, country) being included in the attendee list distributed at the event. My contact information being shared with exhibitors/Sponsors. PDA recording me and using those recordings in future PDA promotional and marketing materials. PDA sending me promotional information via email. PDA sending me promotional information via post.

By registering for this meeting, you agree to abide by the PDA Code of Conduct.



EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

Subject Line: 55 characters or less (including spaces).

To avoid issues, refrain from using spam-like words or symbols (i.e., free, guarantee, act now, earn, \$, %), emojis, all caps, or excessive punctuation.

Sender Name: "PDA on behalf of [Your Company Name]"

**Dimensions:** Max width of 600px | Max File Size: 35k

**Images:** .jpg. All images must be hosted on your server. (.gif format is allowed, but some email clients do not support animated GIFs and will only show the first f ame.)

**Plain Text Version File:** Plain text version of your HTML email with full URLs listed for all links. The text should mirror the HTML version and should not include coding.

### **Specifications**

- All files must be submitted in a zipped folder.
- Keep image file si es small to minimize load times.
- Do not use JavaScript for essential elements. No JavaScript or script tags.
- Do not use shortened URLs (i.e., bit.ly, etc.). If needed for tracking your metrics, use UTM codes instead.
- Use absolute (https://www.yourcompany.com/page) URLs rather than relative (/page) links for images.
- Use image alt text for all your images. Recipients with images disabled will see the alt text.
- Avoid background images.
- Use an even ratio of text vs image to create an email that works even without images loaded. Some email clients block images by default.
- Do not use style sheets. CSS renders incorrectly in many email clients, especially if the recipient tries to forward your email. If your email absolutely requires CSS, use inline styles by embedding the style between the two body tags. Try to use HTML tags instead.
- Use outer tables in place of tags. Background colors may be defined using the bg color attribute within tags. Background colors and attributes will not render properly using tags.
- Avoid Microsoft Smart Quotes they will show up as boxes. Use plain ASCII characters instead (double dashes instead of em-dashes, etc.).
- Rely on concise, compelling text with clear calls to action and prominent text links rather than excessive graphics.
- Do not overuse bold, italic, and underlining formatting.
- Create an email that works even without images loaded. Some email clients, like Gmail and Outlook 2007 and 2010, block images by default.
- 8 Send your HTML and plain text file y email to Alison Caballero at caballero@pda.org and marketingteam@pda.org.

Reminder: All files must be submitted in a zipped fol er.



### **PDA WEEK 2025**

## APP BANNER AD INSTRUCTIONS

EXHIBITION: 07-09 APRIL | PALM SPRINGS CONVENTION CENTER | PALM SPRINGS, CA

**Required Images (width x height):** Prepare the following banner ad sizes. We must receive all of the sizes listed below to ensure ads display across multiple devices.

- 1 7:1 aspect ratio, 1,080 pixels wide x 152 pixels high
- 2 9:1 aspect ratio, 1,920 pixels wide x 225 pixels high
- 3 11:1 aspect ratio, 2,048 pixels wide x 180 pixels high
- 4 13:1 apect ratio, 1,920 pixels wide x 152 pixels high
- **5** 2,048 pixels wide x 200 pixels high
- **6** 1,536 pixels wide x 150 pixels high

### **BANNER EXAMPLES**

EXPAND YOUR SKILLS AS AN O.R. NURSE IN THE U.S. ARMY RESERVE.

Visit Booth # 610

CLICK HERE >

Performance you can trust.

VTI Disposable Surgical Doppler Probes





Your ad will link to the URL provided in your company description. Make sure to complete your first 4 task items in our exhibitor portal.

Please provide all banner ad sizes requested to Alison Caballero at caballero@pda.org.