

Veterinary Hospital Managers Association
PO Box 2280
Alachua, FL 32616



Veterinary Hospital Managers Association

A professional association for veterinary hospital
managers dedicated to providing quality
management education, resources, and networking.

PO Box 2280
Alachua, FL 32616
877-599-2707/518-433-8911 • 888-795-4520 fax
admin@vhma.org • www.vhma.org

What is VHMA?

VHMA is an international professional association, created in 1981, by and for veterinary hospital managers. The guiding principles include the pursuit of excellence in practice management, opening channels of communication, and networking among practices. VHMA offers an accredited certification program and conferences exclusively for veterinary practice management.

Over 1,600 hospital managers, veterinarians, technicians, and consultants belong to the VHMA. Our membership is international with 10% consisting of Canadian citizens and 90% U.S. citizens.

Why be a VHMA Advertiser or Sponsor?

The percentage of team members who meet with veterinary product sales representatives on a regular basis:*

Practice Managers..... 90%
Receptionists..... 83%
Veterinary Assistants..... 79%
Veterinary Technicians..... 79%

Percentage of team members making product purchasing decisions/recommendations:*

	<u>Practice Managers</u>	<u>Receptionists</u>	<u>Technicians</u>	<u>Assistants</u>
Office Equipment	77%	56%	35%	48%
Team Wardrobe	67%	47%	46%	43%
Cleaning and Disinfecting Products	59%	42%	41%	43%
Dental Equipment	46%	31%	53%	33%
Computers and Software	71%	32%	30%	28%
Dermatological Products	33%	24%	32%	24%
Flea and Tick Products	49%	32%	34%	32%
Diagnostics	41%	23%	44%	28%
Grooming Supplies and Tools	42%	40%	33%	38%
Premium Foods	45%	31%	32%	30%
Heartworm Preventives	47%	30%	30%	29%
Therapeutic Diets	42%	29%	35%	29%
Surgical Instruments	29%	17%	46%	21%
Surgical Supplies and White Goods	33%	20%	43%	22%

*Results from 2005 AVHC Veterinary Healthcare Team Study, Advanstar Medical Economics Research Services.

Partnership, Exhibiting and Sponsorship Opportunities...

Exhibiting:

VHMA Trade Show

Our **2010 Annual Meeting and Conference** will be held September 23-26, 2010, at the Hilton DeSoto, in Savannah, GA. This trade show offers opportunities for vendors to exhibit products and/or services of interest to the veterinary profession. The cost to exhibit is \$700. More information is available in this invitation to participate.

Sponsoring:

VHMA Educational Sponsorship

The VHMA is dedicated to providing quality education and management resources to our membership through our newsletter and management educational programs. A VHMA Educational Sponsorship offers you the opportunity to generate name recognition by including your name and/or logo on all conference marketing materials. More information is available in this invitation to participate.

Partnership:

VHMA Business Alliance Partnership

This program provides an opportunity for veterinary industry stakeholders to join the VHMA in advancing and assuring a high overall quality of professional service in the veterinary field. The annual cost to be a VHMA Business Alliance Partner is \$5,000. For more information visit the VHMA Web site at: www.vhma.org

Program Sponsorship and Exhibitor Levels

2010 ANNUAL CONFERENCE SPONSORSHIP OPPORTUNITIES

SILVER SPONSOR \$1,000

The Silver Sponsorship level includes:

- name acknowledgement of conference/meeting sponsorship on conference materials.

GOLD SPONSOR \$2,000

The Gold Sponsorship level includes:

- a complimentary listing in our online Buyer's Guide
- logo acknowledgement of half-day program sponsorship on conference materials.

PLATINUM SPONSOR \$4,000

The Platinum Sponsorship level includes:

- a complimentary listing in our on-line Buyer's Guide.
- logo acknowledgement of full-day program sponsorship on conference materials.
- a complimentary exhibit booth at the conference of sponsorship.



EXHIBITOR OPPORTUNITIES

CONFERENCE EXHIBITOR \$700

As a conference exhibitor you will be supplied with a 8' x 8' exhibit space and recognized in our conference proceeding package.

- All sponsorship levels are renewed annually.
- All rates are U.S. funds.
- Upon receipt of your registration, you will be sent publication and/or exhibitor details.
- If registration is faxed, booth space/sponsorship is not provided until payment is received.

Veterinary Hospital Managers Association, Inc.

Exhibitor/Sponsorship Contract

Company Name: _____

Contact/Title: _____

Address: _____

Telephone/Fax: _____

E-mail Address: _____

Company Web site Address: _____

Show Representative(s): _____

Product/Service Category (check all that apply):

- Accounting and Financial Services
- Advertising Services and Materials
- Biologicals
- Business and Personnel Forms
- Computer Hardware and Software
- Diagnostics
- Food
- Hospital Equipment
- Hospital Supplies

- Legal Services and Products
- Management Consulting
- Office Supplies
- Parasiticides
- Pharmaceuticals
- Staff Training Services and Products
- Publications
- Web site Products and Services
- Other:

- Yes** Our company would like to register for the following sponsorship level:
 Silver Sponsorship (\$1,000) Gold Sponsorship (\$2,000) Platinum Sponsorship (\$4,000)

- Yes** Our company would like to reserve booth space.

Please reserve _____ booth(s) at \$700 for the Annual Conference, September 23-26, 2010, Savannah, GA.

_____ We will require electrical service, additional charge of \$100.

_____ We will require an extra 6' table, additional charge of \$75.

Wireless Internet Access will be available for free.

Products to be displayed: _____

Total Payment Enclosed \$ _____

- All exhibitor and sponsorship funds should be in U.S. dollars.
- All sponsorship levels are renewed annually.
- Upon receipt of your registration, you will be sent our publication and/or exhibitor details.
- If registration is faxed, booth space/sponsorship is not held until payment is received.

A Fact Sheet with exhibiting details is available on the VHMA Web site (www.vhma.org) and will be mailed to you with your registration confirmation.

Payment

Payment Type: check Visa Mastercard Discover American Express

Credit Card Number: _____

Expiration Date: _____ Card security code (CSC): _____

Name on credit card (PLEASE PRINT NEATLY): _____

Complete billing address: _____

Signature of credit card holder: _____

**Return this form and payment to: VHMA • PO Box 2280 • Alachua, FL 32616-2280
(518) 433-8911 • fax (888) 795-4520 • admin@vhma.org • www.vhma.org**