



HASC 2025 ANNUAL MEETING

SPONSOR REGISTRATION FORM

April 23–25, 2025 • Grand Hyatt Indian Wells Resort & Villas • Indian Wells, CA

Register your attendees by visiting <https://hasc.org/sponsor25> and selecting HASC Sponsor. Use discount code Spon25 at checkout. You may also complete the form below and return it to annualmeeting@hasc.org. Questions? Call (213) 538-0737.

COMPLIMENTARY REGISTRATIONS PER SPONSOR LEVEL

KEYNOTE SPEAKER — 8 DIAMOND — 8 PLATINUM — 6 GOLD — 2 SILVER — 3

<i>Organization</i>	<i>Sponsor level</i>
<i>Street address</i>	<i>City</i>
	<i>State</i>
	<i>Zip</i>

1. COMPLIMENTARY FULL-CONFERENCE REGISTRATIONS (PLEASE PRINT)

Major sponsorships include a specified number of complimentary registrations (see above). Please list your complimentary registrants here. Registrants must be employees of the same sponsoring organization.

1	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
2	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
3	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
4	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
5	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
6	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
7	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
8	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>



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2. PAID FULL-CONFERENCE REGISTRATIONS

Please list the names of any additional registrants at the rate of \$995 per person.

1	_____		_____
	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	_____	_____	_____
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
2	_____		_____
	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	_____	_____	_____
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
3	_____		_____
	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	_____	_____	_____
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>
4	_____		_____
	<i>First name</i>	<i>Last name</i>	<i>Name on badge</i>
	_____	_____	_____
	<i>Title</i>	<i>Phone</i>	<i>Email (required)</i>

3. SPONSOR CONFERENCE REGISTRATION FEES

Registration confirmed upon receipt of payment.

Subtotal \$995 x _____ registrants. \$ _____

TOTAL SPONSOR CONFERENCE REGISTRATION FEES \$ _____

4. REGISTRATION PAYMENT INFORMATION

Check enclosed # _____ Amount \$ _____

To pay by credit card, please call (213) 538-0737.



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IMPORTANT REMINDERS

Payment for registration fees must be received by March 28, 2025.
Make check payable and mail to:

Hospital Association of Southern California
515 S. Figueroa St., Suite 1300
Los Angeles, CA 90071-3300



Scan the QR code with your smartphone or other code reader to register online.



Please register your attendees for the HASC Annual Meeting by filling out pages 1 and 2.
Scan and email to annualmeeting@hasc.org.

- Sponsors exhibiting at the Thursday night strolling dinner on April 24 may give away only one grand prize per sponsor. Thank you for your cooperation.
- Cancellations received in writing by March 7, 2025, will be subject to a \$100 processing fee. Refunds will not be granted after April 4 or for no-shows. We welcome substitutions at any time.

COMPETING HOSPITALITY EVENTS

Sponsors and members attending the Annual Meeting cannot plan independent hospitality or other activities during conference hours without specific permission from HASC. Planning such competing events without HASC permission will result in cancellation of your event and loss of any food and beverage deposits. Companies that violate this rule will not be invited to future events. Competing times are Wednesday, April 23, 2 to 9 p.m.; Thursday, April 24, 7 a.m. to 8:30 p.m.; and Friday, April 25, 7 a.m. to noon.

RAFFLE PRIZES

Sponsors/exhibitors at the April 24 Strolling Dinner and Sponsor Exhibit are not required, but are encouraged, to provide one grand raffle prize. Prizes will be awarded by central drawing to HASC members, who must complete the required number of exhibitor visits to be eligible. HASC staff will draw names for prizes on the exhibit floor toward the end of the evening. Only one exhibitor prize may be awarded to any member, to allow multiple members the opportunity to win. Members must be present to win. Sponsors and associate members are not eligible to participate. Sponsors may elect to award prizes independently of the central drawing.

*Thank you for your registration. HASC will send confirmation to you prior to the conference.
If you do not receive a confirmation, please call (213) 538-0737.*

AMERICANS WITH DISABILITIES ACT

Please call (213) 538-0737 for any special needs.

QUESTIONS?

Phone: (213) 538-0737 • Email: annualmeeting@hasc.org