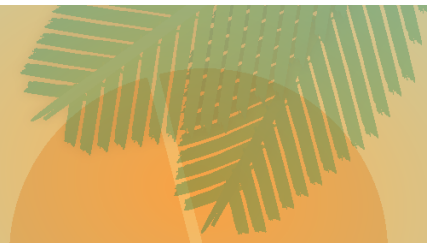




**340B
2020**

**340B COALITION
WINTER CONFERENCE
FEB. 10-12 | SAN DIEGO, CA**



FUNCTION SPACE REQUEST FORM

******* Please note that there is a limited amount of meeting space at the Hilton San Diego Bayfront *******

Any/all companies planning an event to be held at the Hilton San Diego Bayfront and/or the Omni San Diego Hotel during the 340B Coalition Winter Conference between Sunday, February 9 – Wednesday, February 12 **must submit this request form for approval prior to securing space and/or planning an event.** All forms must be submitted to [Carla Williams](#) by **Friday, January 10**; forms submitted after this date will not be accepted. One form should be submitted per request; this will help us keep better track of different set-up requirements and attendee headcounts. **NOTE: Due to limited availability, the deadline to cancel a meeting room reservation and receive a full refund is Friday, January 3.**

Once space has been assigned, the 340B Coalition will add the appropriate fee to your company's account and will introduce you to an events specialist at the hotel that will help with logistics (see disclaimer below for more information). Note that these function spaces are for client meetings and/or receptions; if you are interested in showing a demo, please contact Lee-Anne Gabrielli (lee-anne.gabrielli@340bhealth.org or 202-552-5856). For additional questions and/or information, please contact Carla Williams (carla.williams@340bhealth.org or 202-552-5854).

FEES: PER-ROOM PER-DAY* (not including hotel rental fees)

- 1-25 attendees: \$500
- 26-100 attendees: \$1,000
- 101-500 attendees: \$1,500
- 501-1,000 attendees: \$2,000

*Per 340B Health's partnership benefits, the following levels will receive a discount: Pinnacle, Diamond, and Platinum.

Disclaimer: By submitting this form, the requestor understands that this event may not be approved should it conflict with a 340B Coalition Conference function. Meeting space will be assigned in the order in which the request was received and based on availability. All expenses associated with the event are the sole responsibility of the company listed, not the 340B Coalition. The 340B Coalition does not have any control over additional meeting room rental fees, set-up fees, labor contracts, food & beverage and audio/visual prices, as well as other costs associated with the hotel. Each company is responsible for their own marketing of the event, onsite event signage/directionals, and logistics.

DATE OF REQUEST: _____

CONTACT INFORMATION

Name: _____

Company: _____

Phone: _____

Email: _____

EVENT INFORMATION

Event Name: _____

Event Date: _____

Start Time: _____ **End Time:** _____

Number of Attendees: _____

Audio Visual Required: YES _____ NO _____

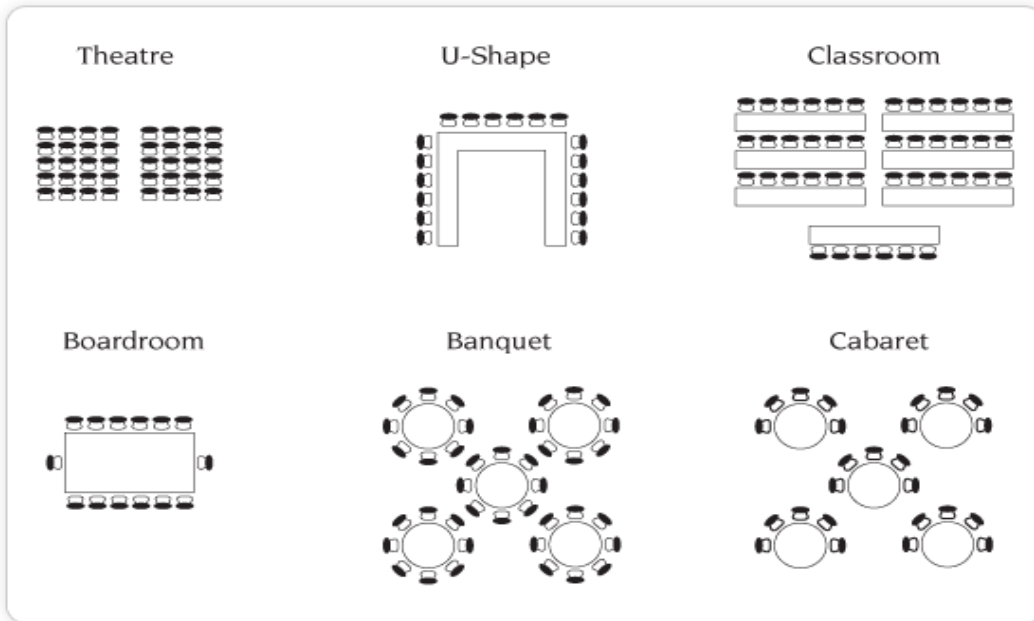
Food & Beverage Required: YES _____ NO _____

EVENT TYPE/SET-UP (see image on second page)

Set-up Type (select one):

- Theater U-Shape
 Classroom/Schoolroom Boardroom
 Reception Banquet/Cabaret Rounds

Other Special Requests



Internal Use:

Event Space Assigned: _____

You will receive a confirmation letter when your event space has been assigned. We will contact you sooner if there is no space to accommodate your meeting. Please allow up to 10 business days for processing time after your request has been submitted.