

2024
RIC
ANNUAL
MEETING
March 20-21, 2024
Arlington, VA | Convene



Industry Partnership of RIC is reserved for organizations that meet the following membership criteria: Any organization (e.g. vendors or suppliers) that is aligned with [RIC's mission](#), is eligible for Industry Partner membership upon approval of the Board of Directors.

The REMS Industry Consortium (RIC) fosters collaboration and innovation to advance patient safety, appropriate access, and best practices in REMS-related drug and biologic risk management.

As an Industry Partner, your organization has the unique ability to connect with REMS professionals, fostering knowledge sharing and personal connections.

| INDUSTRY PARTNER PROGRAM | GOLD: \$22,000 Charter: \$20,000 | SILVER: \$11,000 Charter: \$10,000 | BRONZE: \$8,250 Charter: \$7,500 | SUPPORTER: \$3,850 Charter: \$3,500 |
|--|--|--|--|---|
| Opportunity to present in the Technology Rapid Fire Session on the Annual Meeting program | ● | | | |
| Complimentary Supplier Registrations to the RIC Annual Meeting (\$3,495/person value) | Four (4) | Two (2) | One (1) | 50% Discount |
| Sponsor Branding on-site and in the WHOVA mobile app | ● | ● | ● | ● |
| Final, post-con attendee list for 1X use (opt-ins only) | ● | ● | ● | ● |
| Year-Round Benefits (\$4,500 value) | | | | |
| Opportunity to join the RIC Innovation & Technology Working Group | ● | ● | ● | ● |
| Opportunity to contribute one (1) program-specific REMS case study or featured article for inclusion in the RIC member e-newsletter (<i>content subject to RIC approval</i>) | ● | ● | | |
| Company spotlight in the RIC e-newsletter to members | ● | ● | ● | |
| One (1) Welcome Announcement social post | ● | ● | ● | ● |
| Listing as a REMS Industry Partner on the RIC website with logo and link to URL of choice | ● | ● | ● | ● |

CONTACT: Ashley Kuback, RIC Meeting Manager

AKuback@remsconsortium.org

P:856-380-6868



RIC

REMS Industry ConsortiumSM

Innovating Patient Safety. Mitigating Risk.

RIC INDUSTRY PARTNER APPLICATION

| | |
|------------------|------------------|
| Company Name: | Website: |
| Address: | City, State, Zip |
| Primary Contact: | Email: |
| Contact Title: | Phone: |

Terms: Applications are subject to review and approval by RIC, including confirmation that applicants meet necessary criteria for membership, and membership classifications (as applicable). RIC reserves the right to reject an application for membership or opt to not renew a membership.

Consent: By Checking the "Consent" box, the Applicant agrees that, upon becoming a member, RIC may use its company name and the names of any employees provided by the Applicant in RIC's advertising and marketing efforts, including, without limitation, speaking presentations, conferences, newsletter and social media posts.

Acknowledge: By Checking the "I Acknowledge" box on this Membership Application ("Application") above, the Applicant acknowledges that that the following terms and conditions apply to this Application and RIC Membership.

1. The Application is subject to acceptance by the RIC Board of Directors including verification of the Applicant's eligibility for membership in a particular class or tier.
2. The Applicant agrees to comply with all terms and conditions of RIC's Certificate of Incorporation, RIC's Bylaws, and such rules and policies as the RIC Board of Directors and/or any Task Force(s), Working Group(s) or other committees may from time to time adopt, including but not limited to requirements applicable to specific classes of Membership.

**TOTAL INVESTMENT:
NEW INDUSTRY PARTNERS:**

GOLD: \$22,000 SILVER: \$11,000 BRONZE: \$8,250 SUPPORTER: \$3,850

CHARTER INDUSTRY PARTNERS (Joined before June 2023):

GOLD: \$20,000 SILVER: \$10,000 BRONZE: \$7,500 SUPPORTER: \$3,500

Please Return Application to: akuback@rem Consorium.org

REMS Industry Consortium
1120 Route 73, Suite 200
Mount Laurel, NJ 08054

PAYMENT INFORMATION: All rates are in U.S. dollars.
Payment due upon receipt. No refunds after March 3, 2024.

Invoice me for payment with a secured payment link

Invoice me for payment by ACH/Wire Transfer

Name: _____

Signature: _____

Date: _____