

# Handcrafted Soap & Cosmetic Guild

# **Organizational Policy**

December 1, 2022 (v3)

# ANNUAL CONFERENCE SUPPLIER MEMBER BENEFITS

HSCG Supplier Members are given certain conference benefits. Due to the popularity of the HSCG Annual Conference, and the possibility of sell-out situations, the following policies are established to ensure equity and fairness in administering the Supplier benefits at the HSCG Annual Conference.

## **CONFERENCE BENEFITS**

Conference benefits for Supplier Members are based on the level of membership, and are as follows:

### TIER 1 SUPPLIER MEMBER

- Platinum sponsorship
- 50% discount on any higher level of sponsorship.

### TIER 2 SUPPLIER MEMBER

- Silver sponsorship
- 50% discount on any higher level of sponsorship

### TIER 3 SUPPLIER MEMBERSHIP

• 25% discount on any sponsorship level

### RESTRICTIONS

Conference Supplier Benefits are subject to the following restrictions:

- Any registrations or Supplier tables provided to a Supplier Member as part of their benefits and/or sponsorship level are non-transferrable and must be used by a direct employee of the Supplier Member's company.
- Benefits are for the current year's conference only and may not be held for or accrue to a future year.
- When there are two or more conferences held in one year (e.g. a US conference and a Canada conference), the Supplier member may choose which conference their sponsorship level will be applied to; it may be used for one one conference per year.

# **USE OF CONFERENCE BENEFITS**

**Use of the Conference benefits is optional, not automatic.** When a Supplier Member intends to use some or all of their conference benefits, they must:

1) Complete the "Intent to Use Conference Benefits" form for the approriate membership level. The forms are attached to this policy and are also available on the HSCG website. The form must be emailed, faxed or mailed to the HSCG office by the cutoff date.

Handcrafted Soap & Cosmetic Guild 184 Edie Ave, Suite A Saratoga Springs, NY 12866 Fax: (518) 306-6935

Email: conference@soapguild.org

2) Forms MUST be received by November 30th for the upcoming conference, and must specify exactly which benefits the Supplier Member intends to use.

### SUPPLIER MEMBERS JOINING AFTER NOVEMBER 30TH

When a new Supplier Member joins the HSCG after the November 30th, they may be afforded additional time to apply for their conference benefits under the following conditions:

- 1) If the join date is between December 1st and February 28th, the Supplier shall have 14 days to turn in the "Intent to Use Conference Benefits Form".
- 2) If the join date is between March 1st and the Conference date, the Supplier must turn in the "Intent to Use Conference Benefits Form" within 48 hours of joining.

In either case, benefits shall be given on the basis of availability.

### INTENT

It is the intent of the HSCG to fully accommodate the Supplier Members at the Conference. Every effort will be made to find space for both attendees and exhibitors. Suppliers must note, however, that the closer to the date of the conference, the less likely it is that space will be available.

Approved by the Board of Directors

History:

October 7, 2013 (v1) Original publication date

May 4, 2018 (v2) Updated to assign sponsorship and discount levels for all Supplier members,

update address, revise forms and reformat.

2022 (v3) Reviewed with minor updates

### **CONFERENCE SUPPLIER MEMBER BENEFITS - ATTACHMENT #1**

# SUPPLIER TIER 1

# NOTICE OF INTENT TO USE CONFERENCE SUPPLIER BENEFITS

**Instructions:** This form must be submitted by November 30th preceding the Conference (ie by November 30, 2017 for the 2018 Conference). Tier 1 Supplier Members joining or upgrading after November 30, but before the conference must submit this form on the schedule outlined in the HSCG Policy *Annual Conference Supplier Member Benefits*.

Supplier Company Name:
Supplier Contact Person:
Email: Phone:
CONFERENCE SELECTION
We DO DO NOT intend to use our Conference Supplier Benefits at the Conference
EXIHIBITOR TABLE
We $\square$ <b>DO</b> $\square$ <b>DO NOT</b> intend to take advantage of our complimentary EXHIBITOR SPACE.
We need:   1 TABLES  2 TABLES
ATTENDEE REGISTRATION TICKET
We will be sending $\square$ <b>NO PEOPLE</b> $\square$ <b>1 PERSON</b> $\square$ <b>2 PEOPLE</b> to the Conference.
PERSON #1 - The registration ticket(s) should be for:
Name: Phone:
Address:
City State: Zip:
Email:
Phone:
Meal Preference:   Regular   Vegetarian   Vegan   Gluten Free

PERSON #2 - Th	e registration ticket(s) sh	ould be for:	
Name:		Phone:	
Address:			
City	State:	Zip:	_
Email:			
Phone:			
Meal Preference	: 🗆 Regular 🗀 Veget	arian 🗆 Vegan	☐ Gluten Free
PROGRAM	Воок Ар		
We □ WILL □	WILL NOT be providing	g a FULL PAGE ad	for the Conference Program Book.
(Ads must be proweeks prior to the	-	assigned by the C	onference Director, usually about 10
CONFIRMA	TION		
Signature _			
Print Name			-
Date:			
Email, fax or ma	il the completed form to t	the HSCG Office:	
184 Edie	ted Soap & Cosmetic Guil Ave, Suite A Springs, NY 12866	d	
•	518) 306-6935 onference@soapguild.org	g	

### **CONFERENCE SUPPLIER MEMBER BENEFITS - ATTACHMENT #1**

# **SUPPLIER TIER 2**

# NOTICE OF INTENT TO USE CONFERENCE SUPPLIER BENEFITS

**Instructions:** This form must be submitted by November 30th preceding the Conference (ie by November 30, 2017 for the 2018 Conference). Tier 1 Supplier Members joining or upgrading after November 30, but before the conference must submit this form on the schedule outlined in the HSCG Policy *Annual Conference Supplier Member Benefits*.

Supplier Company Name:
Supplier Contact Person:
Email: Phone:
Conference Selection
We $\square$ <b>DO DO NOT</b> intend to use our Conference Supplier Benefits at the Conference
EXIHIBITOR TABLE
We $\square$ <b>DO DO NOT</b> intend to take advantage of our complimentary EXHIBITOR SPACE with ONE table.
ATTENDEE REGISTRATION TICKET
We will be sending \( \square\) <b>NO PEOPLE</b> \( \square\) <b>1 PERSON</b> to the Conference.
PERSON #1 - The registration ticket(s) should be for:
Name: Phone:
Address:
City State: Zip:
Email:
Phone:
Meal Preference:   Regular   Vegetarian   Vegan   Gluten Free

# PROGRAM BOOK AD We WILL WILL NOT be providing a HALF PAGE ad for the Conference Program Book. (Ads must be provided by the cutoff date assigned by the Conference Director, usually about 10 weeks prior to the conference.) CONFIRMATION Signature \_\_\_\_\_\_ Print Name \_\_\_\_\_\_ Date: \_\_\_\_\_\_

Email, fax or mail the completed form to the HSCG Office:

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Fax: (518) 306-6935

Email: conference@soapguild.org