



ICHP'S 10TH ANNUAL RESIDENCY SHOWCASE

Saturday, September 17, 2011

1:00 PM — 3:00 PM

Held in conjunction with the
Illinois Council of Health-System Pharmacists 2011 Annual Meeting
September 15 - 17
Drury Lane Theatre and Conference Center • Oakbrook Terrace, IL

Showcase Your Residency Program to Interested Pharmacy Students and Give Them the Opportunity to Build Their Connections!

The Illinois Council of Health-System Pharmacists invites you to showcase your residency program to students from the Chicago State College of Pharmacy, University of Illinois at Chicago College of Pharmacy, Midwestern University Chicago College of Pharmacy, Southern Illinois University at Edwardsville School of Pharmacy, St. Louis College of Pharmacy, and other pharmacy schools from around the Midwest.

After a morning of educational programming, student attendees at the ICHP 2011 Annual Meeting will be ready to meet and greet residency directors and representatives from around the Midwest and Great Lakes regions. Many of these students will be completing their formal education within the year and will be considering residencies as a serious step in their career.

RESIDENCY SHOWCASE LOCATION

The ICHP Residency Showcase will be held at Drury Lane Conference Center, 100 Drury Lane, Oakbrook Terrace, IL 60181 in the Terrace Room. Space assignments will be made on first-come, first-serve basis. The ICHP registration desk will be located in the foyer for your convenience.

HOTEL ACCOMMODATIONS

All showcase representatives are responsible for making their own hotel reservations. Special convention room rates are available to ICHP Annual Meeting Showcase Representatives at The Hilton Garden Inn in Oakbrook Terrace (10 Drury Lane, Oakbrook Terrace, IL 60181). **These special rates are available by calling The Hilton Garden Inn (1-877-782-9444) prior to Wednesday, August 24 and mentioning that you are attending ICHP's Annual Meeting!**

WEDNESDAY, SEPTEMBER 14, 2011
Single/Double \$139; Triple \$149; Quad \$159

THURSDAY, SEPTEMBER 15, 2011
Single/Double \$89; Triple \$99; Quad \$109

FRIDAY, SEPTEMBER 16, 2011
Single/Double \$89; Triple \$99; Quad \$109

REGISTRATION FEE

The registration fee for the ICHP 2011 showcase is \$100.00 and includes a 2' x 6' table top and 2 chairs.

SATURDAY'S SCHEDULE FOR ANNUAL MEETING

The 2011 ICHP Annual Meeting student events on Saturday are highlighted below.

8:30 AM - 9:30 AM

Residency Project Pearls

9:00 AM - 11:30 AM

Student Session: Roundtables on Residency Programs

10:30 AM - 1:00 PM

Residency Showcase Set-Up

Location: Terrace Room
Drury Lane Conference Center

11:30 AM - 1:00 PM

Lunch and Awards Program

Residency Showcase representatives are invited to attend this event. 2 complimentary lunches are available to each registered showcase residency. Additional lunches are available for \$25 per representative. *Please indicate on your registration form if you will be attending the Lunch/Awards Program.*

1:00 PM - 3:00 PM

Residency Showcase Program

Please submit your registration form with payment and residency description (in Word format) by August 12.

For a complete ICHP 2011 Annual Meeting Registration Form, please visit www.ichpnet.org or call the ICHP office at 815-227-9292.

*On back -
Residency Showcase
Registration Form
and Instructions for
Submitting Residency
Description*

RESIDENCY SHOWCASE REGISTRATION FORM

ICHP's 10th Annual Residency Showcase • Saturday, September 17, 2011

To register your residency program for a showcase table, complete the following form and forward it with payment to:

ICHP

4055 N. Perryville Road

Loves Park, IL 61111-8653

Phone: 815-227-9292 Fax: 815-227-9294 Email: JHaley@ichpnet.org

Name of Residency Facility _____ # _____
Positions Available

Address of Residency Facility _____

City/State/Zip Code of Residency Facility _____

Name and Credentials of Residency Director _____

Email/Phone Number of Residency Director _____

The following information will appear on the Residency Showcase Badges unless otherwise stated. Updated information can be emailed to JHaley@ichpnet.org.

Name, Credentials, and Titles of Person(s) who will staff the showcase booth:

Name	Credentials	Title	Complimentary Cost of Lunch
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Name	Credentials	Title	Complimentary Cost of Lunch
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Name	Credentials	Title	\$25 Lunch Cost of Lunch
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Name	Credentials	Title	\$25 Lunch Cost of Lunch
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FORM OF PAYMENT

Showcase registration fee is \$100.

Additional lunches are \$25.

My total is \$ _____.

- My check is enclosed payable to: ICHP
- Please charge my:* MasterCard VISA American Express Discover

Credit Card Number: _____

Expiration Date: _____ CVV2 Security Code #: _____

Cardholder's Name _____

Cardholder's Signature: _____

*Orders placed with a credit card may be FAXED to : 815-227-9294

LUNCH AND AWARDS PROGRAM

Residency Showcase representatives are invited to attend this event.

2 complimentary lunches are available to each registered showcase residency. Additional lunches are available for \$25 per representative.

- YES, I will be attending the Lunch and Awards Program.
Number attending: _____ Vegetarian meal(s) : _____

- NO, I will not be attending the Lunch and Awards Program.

RESIDENCY DESCRIPTION

Don't forget to
submit your
residency
description!

In order to give you the maximum recognition for your residency program, we are asking that you submit a brief summary of your residency. This summary should include:

- 1.) The name of your facility and location (city and state).
- 2.) The number of residency program positions available.
- 3.) A brief description of your facility.
- 4.) A brief description and/or goal(s) of your residency program.

Please save the description as a Word Document and email this information directly to JHaley@ichpnet.org by August 12, 2011 to ensure your residency description is included in the 2011 Annual Meeting program materials.

SHOWCASE REGISTRATION DEADLINE: AUGUST 12, 2011