

Beaumont

Department of Continuing Medical Education Agreement to Exhibit at a CME Activity

CME Activity	<u>Echo in the Slopes</u>
Date of Activity	<u>May 16-17, 2020</u>
Location	<u>Boyne Mountain</u>
<p>➤ Exhibitor agrees to abide by all requirements of the ACCME's Accreditation Criteria, the ACCME Standards for Commercial Support, and Beaumont Continuing Medical Education Policies. Specifically:</p> <p>➤ Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support. Beaumont Health will be responsible for the identification, determination, and selection of needs, objectives, content, faculty, educational methods, evaluation, and audience and will ensure that the decisions are made free of the control of the exhibitor.</p> <p>➤ All exhibitors must be in a room or area separate from the education; the exhibits must not interfere or in any way compete with the learning experience prior to, during, or immediately after the activity.</p> <p>➤ Representatives of the company exhibiting may attend CME activities at the discretion of Beaumont Health for the direct purpose of the representatives' own education; however, they may not engage in sales or marketing activities while in the space or place of the educational activity.</p> <p>➤ Information on the identity of learners at CME activities is considered to be the confidential property of Beaumont Health. Information on learners will only be released to third parties when learners have prospectively signed a document authorizing this release of information.</p> <p>➤ Exhibit space at this CME activity has not and will not be given as a condition of commercial support. A separate exhibit fee is for rental of space and shall be paid to the sponsoring organization, department or division.</p> <p>➤ <i>Exhibit Set-up: After 3 p.m. Friday, May 15, 2020 Exhibit Tear-Down: After 10 a.m. Sunday, May 17, 2020 (after the break)</i></p> <p>Payment must be received by May 1, 2020. Exhibits will be confirmed upon receipt of this signed agreement and payment information; all exhibits are offered on a first come, first served basis. Payment must accompany this agreement in order to be accepted. All payments are final; refunds will not be awarded for exhibitors who cancel or do not show on the date of the event.</p>	

Exhibit Fees: **Standard (6' Table-\$2,000)**

Each Exhibit fee includes:

- ✓ Exhibit hall open to attendees during breakfasts, breaks, and the pre-jeopardy reception
- ✓ Meeting registration for two representatives per table
- ✓ Skirted table (size above), two chairs, and electrical outlet

Information about the Exhibitor:

Company/Organization

Exhibit Contact

Mailing Address _____ **City/State/Zip code** _____

Telephone _____ **Email** _____

Representative(s) who will be working at the conference: (Limit 2 per table) additional reps may register at:

1	Name:		Phone:		Email:	
2	Name:		Phone:		Email:	

Payment Information:

Check
Payable to: Michigan Society of Echocardiography
Mail to: 936 W. Bates, Birmingham MI 48009
(Federal Tax ID# 38-2463200)

Check here if you wish to pay by credit card.
You will receive an email with a link to pay electronically.

By signing this form, I indicate that I have reviewed and will abide by the terms and conditions of this agreement.

Signature: _____

Please return this signed and completed form to:

ternesk@mail.gvsu.edu

Questions? Contact Kristen Ternes • ternesk@mail.gvsu.edu