



EMORY
UNIVERSITY
SCHOOL OF
MEDICINE

OFFICE OF CONTINUING MEDICAL EDUCATION

1462 Clifton Road, Suite 276
Atlanta, GA 30322
404-727-5695
404-727-0468 (direct)
404-727-5667 (fax)

Title of Activity: Georgia Neurological Surgery Annual Meeting 2020

Date of Activity: March 14, 2020

Location of Activity: Emory Brain Health Center, Atlanta, GA

Statement of Purpose:

Company agrees to purchase exhibit space in the amount of \$_____ to exhibit at the above-named Activity. This agreement is conditioned upon Company review and acknowledgement of the terms outlined below and emailing or faxing this signed acknowledgement to NAME, EMAIL; 404-727-5667 at least 30 days before the Activity date.

Promotional Activities:

1. The Exhibitor agrees to abide by the ACCME *Standards for Commercial Support of Continuing Medical Education*.
2. Arrangements for exhibits may neither influence planning nor interfere with the presentation of the educational Activity.
3. Exhibitors may promote their products only at designed times and in designated areas during the Activity.
4. Commercial/promotional materials may not be displayed nor distributed in the same room immediately before, during, or immediately after the Activity nor in any material disseminated as part of the program.
5. Representatives of commercial supporters and/or exhibitors may enter the educational session if they wish, but may not engage in sales activity in the room where the Activity is held.
6. As the accredited CME sponsor of this educational activity, Emory University School of Medicine requires all exhibitors to disclose through signage at exhibit booths, the FDA status of the medical devices or pharmaceuticals displayed. Further information on these rules and regulations may be obtained from the FDA.
7. Exhibit fees are payable to the Emory University School of Medicine (Tax ID #58-0566256) prior to the beginning of the Activity.
8. Emory University School of Medicine, not the exhibiting Company, has ultimate responsibility for planning, design, content and execution of the Activity.
9. The exhibit fee will be used solely for the purchase of exhibit space and the Company is not deemed an industry sponsor of the activity.
10. No part of any payment for an exhibit is conditioned in any way on the explicit or implicit requirement or expectation of the purchase or recommendation of exhibitor products.
11. Funds will be returned due to cancellation of program. If the Activity is rescheduled, Emory University School of Medicine may retain the funds to support the postponed Activity.

The Exhibitor hereby agrees to the terms and conditions above.

Exhibitor: _____

(Please Print)

By: _____ Date _____

Title of signatory: _____

Address: _____

Email: _____ Phone: _____

EXHIBIT REGISTRATION FORM

GEORGIA NEUROLOGICAL SOCIETY ANNUAL MEETING

Saturday, March 14, 2020

Emory Brain Health Center, 12 Executive Park, Atlanta, GA 30329

General Information	Company Name		
	Contact Name		
	Address		
	Email	Fax Number	
	Representatives Attending Event (for Name Badges)		
	NAME	PHONE	EMAIL

Additional Needs	<input type="radio"/> Electricity <input type="radio"/> Extension Cord	
	<input type="radio"/> Additional Needs (i.e. proximity to other exhibitors or special equipment)	
	<p>Please note: Placement is reserved on a first come, first served basis. Please respond no later than March 2, 2020. Final Details will be emailed to you by March 6, 2020.</p>	

Payment Information	Payment <input checked="" type="checkbox"/> \$2,500 <input type="radio"/> Check (made payable to Emory University) – Tax ID # 58-0566256	
	<input type="radio"/> Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> AmEx <input type="checkbox"/> Discover	
	Name on Card: _____	
	Credit Card Number: _____	
	Exp Date: _____	
Signature: _____		

Mail this form with check to -
 attn: Cathy Jackson, CME Program Coordinator Emory University Office of CME,
 1462 Clifton Road, NE, Suite 276, Atlanta, GA 30322
 Or fax to 404-727-5667
 Phone: 404-727-0063 or email kgray02@emory.edu with questions