

COMMERCIAL SUPPORT FORM

Indiana Orthopaedic Society 2019 Annual Meeting April 11-13 2019
Indianapolis -Conrad

Deadlines:

Hotel Registration - March 18, 2019 1-800-Conrads

(see IOS brochure for details)

Conference Registration- March 29, 2019

Please print or Type

COMPANY INFORMATION

Company Representative Name: _____

Title: _____ *Email _____

Company Name: _____

Address: _____

City/State/Zip: _____

Office Phone: _____ Fax: _____

**Please include- information is necessary to keep contacts updated.*

PAYMENT INFORMATION

Make checks payable to: Indiana Orthopaedic Society

Credit card payments may be faxed to: 317-388-8984.

No debit cards will be accepted. No refunds after 3/1/2019

IOS federal tax ID 35-6055587

Check enclosed Visa MasterCard
 American Express

My total payment is \$ _____ (from total Conference fees at the lower right)

Card Number: _____

CVV Code _____ Exp. Date _____

Name as it appears on card: _____

Intent: It is the intent of this agreement to ensure that the CME activity will be independent, objective, balanced and scientifically rigorous, so that it will not be reviewed as promotional and the listed company will not be viewed as responsible for its content. IOS will take all necessary steps to ensure that this objective is reached.

Assurance: IOS and the listed companies agree to abide by the requirements of the ACCME Standards of Commercial Support of Continuing Medical Education, and IOS will acknowledge educational support from the commercial source in the activity brochures and/or syllabi and other activity materials.

Dress Code: All exhibitors and attendees are expected to dress appropriately in business attire during the scientific portion of the conference.

Exhibitors may attend any or all talks, soliciting is only permitted in the Exhibit Hall.

ADA: Please advise IOS and the Conrad if you have a physical disability requiring special needs.

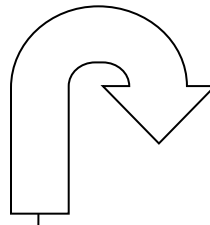


EXHIBIT - SPONSORSHIP OPORTUNITIES

Participation in any of the following opportunities will demonstrate your support and high regard for the Orthopaedic profession. The more substantial your participation, the more notable your recognition and exposure-register now and secure the best location.

Check your exhibit choices:

\$5,000 * Gold Level - Benefits include:

- Listing in the Syllabus
- 2 exhibit tables (if desired) with 4 exhibitors
- 4 copies of Meeting Registrants List, name/city/state
- Free AD on the IOS website for two (2) months
- Listing and product description in meeting syllabus- maximum 25 words.

\$3,500 * Silver Level - Benefits include:

- Listing in the Syllabus
- 2 exhibit tables (if desired) with 4 exhibitors
- 2 copies of Meeting Registrants List, name/city/state
- Free AD on the IOS website for one (1) month
- Listing and product description in meeting syllabus- maximum 25 words.

\$2,000 * Bronze Level - Benefits include:

- Listing in the Syllabus
- 1 exhibit table with 1 exhibitor
- 1 copy of Meeting Registrants List, name/city/state
- Listing and product description in meeting syllabus- maximum 15 words.

\$5,000 * Reception Sponsor: Special Recognition

Name of Sponsor: _____

Contact Name: _____

Contact Phone: _____

\$150 *Additional Exhibitor Badges

Number of badges: _____ x \$150 = \$ _____

Social Event: Thursday April 11, 2019

**President's Welcome Reception - Conrad
Light Buffet and Cocktails-6:00pm-8:00pm
Number Attending: _____**

Total Conference Fees = \$ _____

Prices are per person. Pre-registration is available until **March 29, 2019**. After that date all attendees must register onsite. Badges are required for entrance to all scientific sessions and social events. Registration fees include breakfast, lunch and breaks on Friday, all fees help to cover meeting expenses including convention rental fees, AV fees, speaker fees, and CME accreditation through the American Academy of Orthopaedic Surgeons. Please complete all areas on this form.