

# **EXHIBITOR PROSPECTUS**

## **Oregon Dermatology Society Annual Conference** **AUGUST 27-29, 2010 - Sunriver Lodge, Sunriver, Oregon**

### **EXHIBIT SUPPORT OPPORTUNITIES**

#### **EXHIBIT LEVELS SUPPORT**

Oregon Dermatology Society recognizes the contributions of those who support the organization for the Annual Conference. Exhibit Levels are listed below. Exhibitors will be recognized in program and on signage and verbally in accordance with level of support.

<b><u>Platinum Contributors:</u></b>	<b><u>\$6000 and over</u></b>
<b><u>Gold Contributors:</u></b>	<b><u>\$4001-\$6000</u></b>
<b><u>Silver Contributors:</u></b>	<b><u>\$2001-\$4000</u></b>
<b><u>Bronze Contributor:</u></b>	<b><u>\$2000</u></b>

#### **OUTSTANDING SUPPORT**

##### **REFRESHMENT BREAK: \$1,000. (3 available)**

Coffee and light snacks for attendees. Acknowledgement in program and on signage related to event.

##### **CONTINENTAL BREAKFAST: \$2,500. (2 available)**

Continental breakfast for attendees. Acknowledgement in program and on signage related to event.

##### **FRIDAY NIGHT PRESIDENT'S RECEPTION: \$5,000. (1 available)**

Friday night reception for attendees and spouses/guests. Acknowledgement in program and on signage related to event.

##### **SATURDAY NIGHT DINNER: \$5,000. (1 available)**

Saturday night dinner for attendees and spouses/guests. Acknowledgement in program and on signage related to event.

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**EXHIBIT DAYS:** Friday, August 27; Saturday, August 28; Sunday, August 29, 2010 (see Program).

**LODGING:** Sunriver Lodge, Sunriver, Oregon. 541-593.1000. 800-547-3922. Lodge Village Guestroom: \$239. Lodge Village Suite: \$324. River Lodge Guestroom: \$334. 2-Bedroom Condos/4-Bedroom Houses: \$279-\$570. Ask for Oregon Derm Meeting Rate. Taxes, Resort Fees, and Cleaning Fees are additional. Rates good 3 days prior and 3 days after meeting dates. [www.sunriver-resort.com](http://www.sunriver-resort.com).

**ATTENDEES:** Attendees at this conference include general and subspecialty dermatologists, allied health practitioners, residents (dermatologists in training) and fellows in dermatology training, as well as medical students interested in dermatology health care. A hard copy Attendee List will be provided onsite at the conference.

**EXHIBIT BOOTH:** Exhibit booths are assigned shortly prior to the conference. One booth space includes a 6' x 30" skirted table, two chairs and a waste basket. Booth space not occupied by the close of Friday, will be forfeited by the exhibitor and this space may be resold, reassigned, or used by conference management.

**ELECTRICITY HOOKUP:** Electrical outlets are limited in the exhibitor area. Please order on form.

**SECURITY:** Exhibit hall will be locked at all times when not in use.

**BREAKFAST & BREAKS:** Breakfast, break food and beverages will be available in the exhibit hall.

**SETUP/TEARDOWN:** Setup: Friday, August 27, 9:00am. Teardown: Sunday, August 29, 10:30am.

**CONFIRMATION:** Exhibitor confirmation will be sent upon receipt of completed application and payment.

**EXHIBITOR AGREEMENT/REGISTRATION FORM**

**Oregon Dermatology Society Annual Conference**

**AUGUST 27-29, 2010 - Sunriver Lodge, Sunriver, Oregon**

**REGISTRATION & PAYMENT:** Upon receipt of your signed agreement and payment, you will be EMAILED a confirmation letter with specifics regarding exhibiting. **DEADLINE TO REGISTER - JULY 10, 2010**

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX#: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**EXHIBITOR LEVEL SUPPORT**

- |   |   |
|---|---|
| <input type="checkbox"/> Platinum Contributors: \$6000 and over | <input type="checkbox"/> Gold Contributors: \$4001-\$6000 |
| <input type="checkbox"/> Silver Contributors: \$2001-\$4000     | <input type="checkbox"/> Bronze Contributor: \$2000       |

Electricity Needed

**OUTSTANDING SUPPORT**

- |  |  |
|--|--|
| <input type="checkbox"/> <b><u>REFRESHMENT BREAKS: \$1,000</u></b><br>(3 available)    | <input type="checkbox"/> <b><u>CONTINENTAL BREAKFAST: \$2,500</u></b><br>(2 available) |
| <input type="checkbox"/> <b><u>PRESIDENT'S RECEPTION: \$5,000</u></b><br>(1 available) | <input type="checkbox"/> <b><u>SATURDAY NIGHT DINNER: \$5,000</u></b><br>(1 available) |
| *****  |  |
| <input type="checkbox"/> <b><u>FRIDAY NIGHT RECEPTION-ATTEND (No Cost)</u></b>         | <input type="checkbox"/> <b><u>SATURDAY NIGHT DINNER: \$50</u></b>                     |

**TOTAL AMOUNT SUBMITTED: \$ \_\_\_\_\_**

**TO PAY BY CREDIT CARD, PLEASE COMPLETE THIS INFORMATION:**

Type of CARD: VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

Name on Card: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Zip Code of Card Holder: \_\_\_\_\_

**Please make your check payable to Oregon Dermatology Society. Tax ID #93-0773476.**  
**The signed registration form should be FAXED to 360-326-1844, and mailed with payment, to**  
**Mary Olhausen, Executive Director, Oregon Dermatology Society.**  
**1521 North Jantzen Avenue, #148. Portland, OR 97217.**

**PLEASE INDICATE IF THERE ARE COMPANIES YOU DO NOT WANT TO BE PLACED NEXT TO**