



## **EXHIBIT SPACE OR SPONSORSHIP APPLICATION PACKET**

### **2019 Utah Osteopathic Medical Association Annual CME Conference**

Thursday, August 22, 2019 through Saturday, August 24, 2019  
Thanksgiving Point, Garden Room, 3900 N Garden Drive, Lehi, UT

---

#### **About UOMA**

The mission of the Utah Osteopathic Medical Association is to serve osteopathic physicians and students in Utah through coordinated efforts of promoting and advancing osteopathic medicine, supporting and delivering medical education, and fostering the highest quality of osteopathic medical care to the people in Utah.

#### **UOMA Contact Information**

Marcelle Smith, Executive Director  
350 E 4500 S, Suite 500  
Salt Lake City, UT 84107  
801.747.3500 x-251 office  
801.916.3250 mobile  
Email: [director@utahoma.org](mailto:director@utahoma.org)

#### **Exhibition Dates and Times**

Thursday, August 22, 2019 through Saturday, August 24, 2019

UOMA expects approximately 50 physicians to attend this conference.

Conference Schedule: (subject to change)

	Thursday, August 22	Friday, August 24	Saturday, August 24
Vendor set-up	6:00 a.m.	6:30 a.m.	6:30 a.m.
Registration/Breakfast/Exhibits	7:00- 7:25 a.m.	7:00- 7:25 a.m.	7:00- 7:25 a.m.
Welcome	7:25- 7:30 a.m.	7:25- 7:30 a.m.	7:25- 7:30 a.m.
Lectures	7:30- 9:30 a.m.	7:30- 9:30 a.m.	7:30- 9:30 a.m.
Break/Exhibits	9:30- 9:45 a.m.	9:30- 9:45 a.m.	9:30- 10:10 a.m.
Lectures	9:45- 11:45 a.m.	9:45- 11:45 a.m.	10:10- 12:10 p.m.
Lunch	12:00- 1:00 p.m.	11:45-12:45 p.m.	Adjourn
Lectures	12:45- 2:45 p.m.	12:45- 2:45 p.m.	
Break/Exhibits	2:45- 3:00 p.m.	2:45- 3:00 p.m.	
Lectures	3:00- 5:00 p.m.	3:00- 5:00 p.m.	
Social / Hor d'oeuvres	5:00- 6:00 p.m.	<i>Only sponsor is invited.</i>	



# **EXHIBIT SPACE OR SPONSORSHIP INFORMATION RULES, AND REGULATIONS**

---

## **Rules**

These rules and regulations governing the exhibits under the auspices of the Utah Osteopathic Medical Association (UOMA) and Thanksgiving Point are part of the agreement for space.

## **Exhibit equipment**

All tabletops are 6'. Additional needs are to be provided by the exhibitor or requested through UOMA on the application form. Electrical outlets may be limited, so special requests should be specified on the application. Wireless internet is available. (Caution: Best not to rely on wireless internet for your exhibit.)

## **Exhibit space location**

Preference for location will be based upon receipt of application with payment and choices. Deadline for submission of application is August 1, 2019. UOMA cannot guarantee that space will still be available after that date.

## **Cancellation/failure to occupy**

In the event an exhibitor cancels its participation, refunds will be made as follows: 50% refund for cancellations on or prior to August 1, 2019; no refund after August 1, 2019. Any space not occupied will be forfeited by exhibitor without refund.

## **Use of space**

Exhibitors shall arrange their exhibits so that they do not obstruct other exhibits. Aisles must be kept clear. Safety and fire exits and equipment must be left accessible and in full view at all times.

## **Liability**

It is mutually agreed that the UOMA shall not be liable to an exhibitor for any damage to or loss or destruction of an exhibit or the property of an exhibitor or injuries to his/her person resulting from any cause. All claims for any such loss, damage or injury are expressly waived by the exhibitor.

## **Security**

UOMA shall exercise reasonable care for the protection of exhibitors' materials and displays. Beyond this, UOMA, or any office, director or staff member thereof will not be responsible for the safety of the property or the exhibitor from any cause.

## **Restrictions**

UOMA reserves the right to prohibit any display or exhibit or any part of a proposed exhibit which it judges not suitable or in accordance with acceptable professional ethics.

## **Hotel Accommodations**

Venue is not a hotel, and exhibitor is responsible for their own hotel accommodations, if applicable.

## **Attendee List**

Attendee lists will not be provided, but exhibitor may collect information from the attendee upon their consent.

## **Noise**

Public address, sound-producing, and amplifying devices that project sound (i.e., music, singing) beyond the exhibitor's space are prohibited.

## **Food and beverage**

Exhibitors may dispense bite-size snacks/candy from their exhibit. Break food will be set in or near the exhibit area. (See floor plan map.)

## **Floor prizes**

Floor prizes may be given from private drawings at any of the exhibits. Exhibitor is responsible for type of prizes and their delivery. UOMA cannot guarantee that prize winners are qualified potential buyers of exhibit goods and services.

## **Shipping/storage**

Shipping and storage of exhibit items should be avoided. If necessary, specific questions regarding shipping and storage should be directed to the hotel/event location. The exhibitor agrees to ship all articles at his/her own risk and expense.

## **Setup of exhibits**

Exhibits may be set up starting at 6:00 a.m. on Thursday, August 22, 2019. Because attendees begin arriving about 7 a.m., exhibitor is encouraged to have exhibits ready for review by that time. UOMA Executive Director will be available on-site to help with any last-minute needs.

## **Exhibit hours**

See attached schedule.

## **Removal of exhibits**

Booths must be dismantled no later than noon on Saturday, August 24, 2108.

## **Rights of trade show management**

Should any emergency arise, of any nature, prior to the opening show date which would prevent its scheduled opening (destruction or damage to the exhibit area by fire, wind storm, strikes, acts of God, etc., or a declaration of any emergency by the Government), it is expressly agreed that UOMA may retain as much of the payment for exhibit space as is necessary to cover the expenses incurred by UOMA up to the time of such emergency. All points not covered by these rules are subject to the judgement of UOMA.



# APPLICATION FOR EXHIBIT SPACE OR SPONSORSHIP

## 2019 Utah Osteopathic Medical Association Annual CME Conference

Thursday, August 22, 2019 through Saturday, August 24, 2019

Application form (fill in)

Company Name:		Services/Products:	
Contact Person:		Email:	
Address:	City:	State:	Zip:
Phone:	Fax:	Company Website:	

### Booth and Sponsorships *Please check ✓ applicable responses.*

*First come, first served. Continental breakfast and lunch provided for two representatives.*

	We are interested in a Booth. – \$700 Includes 6' table; electricity (may be limited); wireless internet; presence on UOMA website at <a href="http://www.utahoma.com">www.utahoma.com</a> from date of application payment through September 15, 2019 (please provide advert 480 pixels by 90 pixels, 72 dpi, saved as .gif or .jpeg).
	We would like to request electricity.
	We are interested in being a Sponsor in the following ways: <input type="checkbox"/> TH Social – \$500, Two company representatives may attend the social and provide literature. <input type="checkbox"/> FRI Lunch – \$1500, Includes a booth and company will be given <u>15 minutes</u> to present the company and services/products during lunch. <input type="checkbox"/> Breaks – \$250/break TH am <input type="checkbox"/> , TH pm <input type="checkbox"/> , FRI am <input type="checkbox"/> , FRI pm <input type="checkbox"/> , SAT am <input type="checkbox"/> <input type="checkbox"/> Medical Student – \$150/student x Quantity: _____ Supports Student Research Poster Contest.

### Application Fee

	Make <b>check</b> payable to and send to: Utah Osteopathic Medical Association c/o Marcelle Smith 310 E 4500 S, Suite 500 Salt Lake City, UT 84107	Fax: 801-747-3501
	Pay by electronic invoicing. <i>An e-invoice will be sent to the email address above at which time you may make payment on a secure PayPal site. You are not required to have a PayPal account to use this option.</i>	

### Name of Company Representatives Administering Booth


### Agreement

In accordance with the exhibit and sponsorship information, rules, and regulations, I hereby accept the terms and conditions for exhibiting at the 2019 UOMA Annual CME Conference. This completed form represents a binding agreement between the exhibitor and UOMA.

Signature

Title

Date