

**Exhibitor Application**

**Fees**

**Exhibit Levels (check one):**

**\*NOTE:** Each category includes complimentary registration for a specific number of company representatives; the registration fee for each additional representative is \$175

**Gold Level Exhibitors - \$3,000**

- Enhanced exhibit location
- Free Wireless Internet
- Logo recognition on conference website and conference binder
- \*Complimentary registration for 2 representatives

**Silver Level Exhibitors - \$2,500**

- Enhanced exhibit location
- Free Wireless Internet
- Logo recognition on conference website and conference binder
- \*Complimentary registration for 1 representative

**Bronze Level Exhibitors - \$2,000**

- Free Wireless Internet
- Logo recognition on conference website
- \*Complimentary registration for 1 representative

**REGISTER ONLINE TO PAY BY CHECK OR CREDIT CARD (VISA, MC, AMEX)**

<https://chestclub.cme.ufl.edu/>

**Send check payable to "University of Florida" with confirmation of online registration to:**

**Regular Mail:** UF Continuing Medical Education, PO Box 100233, Gainesville FL 32610.

**FedEx:** UF Continuing Medical Education, 720 SW 2<sup>nd</sup> Ave., Suite 575, Gainesville, FL 32601

UF Tax ID# is 59-6002052 (W-9 form available)

\_\_\_ Check enclosed in the amount of \$ \_\_\_\_\_

**CALL UF GAINESVILLE CME OFFICE AT (352) 733-0064 FOR QUESTIONS REGARDING PAYMENT.**

### Exhibitor Information

*Please list Association/Company Name as you would like it listed in the Exhibitor Directory.*

Association/Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

**Representative(s) attending Symposium: Name, Email, and Phone (please print)**

1. Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**PLEASE E-MAIL YOUR COMPLETED COPY OF THIS FORM TO**  
[\*\*m.mirsaeidi@ufl.edu\*\*](mailto:m.mirsaeidi@ufl.edu)

By signing below, exhibitors agree to hold the University of Florida harmless from and against any and all claims and damages of every kind arising out of or attributed, directly or indirectly, to the operation or performance of Chest Club, May 12, 2022, in Jacksonville, Florida.

Printed Name		Title	
Signature		Date	

*Contact: Mehdi Mirsaeidi, MD, Division of Pulmonary, Critical Care and Sleep-Jacksonville, (240-383-7539) or email [m.mirsaeidi@ufl.edu](mailto:m.mirsaeidi@ufl.edu)*

## Chest Club

May 12, 2022

Marriott, 4670 Salisbury Rd Jacksonville, FL 32256

### Exhibitor/Conference Sponsorship Information

**SET-UP** Thursday, May 12, 2022 05:00pm – 06:00pm

Gold Exhibitors

Silver & Bronze Exhibitors

**EXHIBIT HOURS** Thursday, May 12, 2022 06:00pm – 08:00pm

1. Booth location will be assigned by Chest Club organizers based on level of support.
2. Includes free admission and materials to academic session by exhibitor badge identification for number of representatives based on level of support.
3. Each booth area includes an 8' x 6' carpeted space.
4. Payment in full is due by **May 1, 2022**. Deposits and incomplete payments will not be accepted, but please submit Exhibit Application to place a tentative hold on exhibit space.
5. No refunds will be given for cancellations received later than **May 1 2022**. The cancellation notice should be emailed to [cme-mail@ufl.edu](mailto:cme-mail@ufl.edu) or faxed to UF CME Office at (352) 733-0007.
6. No person/organization may lease any portion of their exhibit space to any other party.
7. Exhibits should be consistent with the mission of the symposium. The University of Florida makes the final decision on exhibitor application acceptance and reserves the right to request the immediate withdrawal of any exhibit that it believes to be injurious to its purpose.