



July 2, 2018

Dear Potential Exhibitor,

On behalf of course directors Bobbi Pritt, M.D., and Abinash Virk, M.D., we are pleased to announce our upcoming **Infectious Diseases Practice Updates 2019** to be held **February 4-8, 2019**, at the **Fairmont Orchid, Kohala Coast, Big Island, Hawaii**.

The Mayo Clinic Infectious Diseases Practice Updates will offer advanced clinical expertise, case-based didactic sessions, and interactive sessions using an audience response system to increase knowledge, performance and patient outcomes. Topics covered at this year's course include:

- Emerging global infections
- Central nervous system infections
- New molecular microbiology diagnostics
- *Clostridioides difficile* infection
- Gram-negative resistances and new antimicrobials for gram-negative organisms
- New guidelines review

We anticipate 150 attendees at this year's course. Additional course details can be found on the [course website](#) as they become available.

Mayo Clinic recognizes these types of educational programs would not be possible without your support. We invite you to participate at this educational activity with an exhibit in the amount of \$2,500. This fee is for the exhibit space only. Industry exhibitors are provided a draped table with two chairs. In support of ACCME guidelines exhibitors will be located in a separate area from the educational activity. Exhibit space is limited and located near the food and beverage area for optimal contact during breakfast, break, and lunch.

To exhibit at this course please complete and return the Exhibitor Agreement form. Please submit payment before January 25, 2019. Payments can be made payable to Mayo Clinic School of Continuous Professional Development. For your convenience, our Federal tax identification number is 41-6011702. We have also included a copy of our W9.

We look forward to the success of our **Infectious Diseases Practice Updates 2019** course and hope you will be able to join us in Hawaii this coming February. If you have any questions or if your company requires completion of a web-based application, please feel free to contact me.

Sincerely,

Kris Jones
Education Coordinator
Mayo School of Continuous Professional Development
200 First Street SW
Rochester, MN 55905
Jones.kristen@mayo.edu
Phone: 507-266-3071

Mayo Clinic School of Continuous Professional Development (MCSCPD) Exhibitor Agreement

Activity Title	Infectious Diseases Practice Updates 2019
Activity Number	19R05890
Location	Fairmont Orchid, Kohala Coast, Big Island, Hawaii
Dates	February 4-8, 2019

Agreement between: ACCREDITED PROVIDER: Mayo Clinic College of Medicine and Science – MCSCPD AND:

Company Name (Exhibitor) (as it should appear on printed materials)	
Exhibit Contact (if different then exhibit Rep.)	
Name(s) of Representative(s) exhibiting: (Maximum of two representatives allowed per exhibit)	
Address	
Telephone	
Fax	
Email	
The named exhibitor wishes to exhibit at the above named activity for the amount of \$2,500.00	

NOTE: There may be additional charges depending on the meeting location (power, internet access, etc.).

Please list additional requests here: (please note: additional requests may incur additional fees)

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org: SCS 4.2: "Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME." "For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.**"
- EXHIBITOR may only distribute educational promotional materials at their exhibit space. Distribution of non-educational items (pens, notepads, etc.), pharmaceuticals or product samples is prohibited.
- All exhibit fees associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint provider, or any other party involved with the activity.
- Completion of this agreement represents a commitment and EXHIBITOR is obligated to provide full payment of all amounts due under this agreement by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.
- If this agreement is cancelled by either party forty-five (45) days or more in advance of the Activity Date, PROVIDER will refund the Exhibit Fee less a \$300 processing fee. If this agreement is cancelled by EXHIBITOR less than forty-five (45) days in advance of the Activity Date, the total amount due under this Agreement shall be immediately due and payable to PROVIDER.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.

Note: All exhibitors must be approved by MCSCPD and this agreement is not binding until both parties have signed. MCSCPD maintains the right to refuse any exhibitor.

By signing below, I agree to the “Terms and Conditions” outlined on Page 1 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

The person signing below is authorized to enter into this agreement:

Exhibitor Representative Name	Signature	Date
Mayo Clinic Representative Name	Signature	Date

PAYMENT INFORMATION

Please indicate your method of payment:

PROVIDER Federal Tax ID number is 41-6011702.

Please remit check payable to: Mayo Clinic- Mayo Clinic School of CPD. Please identify name of course on the check stub.

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card or Wire Transfer
Make payable to: Mayo Clinic Mayo Clinic School of Continuous Professional Development 200 First St SW, Plummer 2-60 Rochester, MN 55905 Please identify Infectious Diseases Practice Updates 2019 on the check.	For payment by credit card or wire transfer, please call the MCSCPD Registrar at 800-323-2688 <i>Do not send credit card information via email or fax.</i>

Complete and return this form along with your payment made to Mayo Clinic,
Federal Tax ID# 41-6011702 before **January 25, 2019** to:

Kris Jones

Mayo Clinic School of Continuous
Professional Development

200 First Street SW
Rochester, MN 55905

jones.kristen@mayo.edu

Phone: 507-266-3071