



December 21, 2015

Dear Potential Exhibitor,

On behalf of Mayo Clinic, Mayo School of Continuous Professional Development, and course directors Ryan A. Meverden, P.A.-C., and Kelly J. Christensen, P.A.-C., we are pleased to announce the Physician Assistant Board Review course, which will be held August 2-5, 2016 at the Mayo Civic Center in Rochester, Minnesota. We are very excited to be independent of the Internal Medicine Board Review this year to allow us to tailor the course to Physician Assistant and Nurse Practitioner needs.

The 2016 Mayo Clinic Physician Assistant Board Review course is a comprehensive review designed to not only help with Initial and Recertification Examinations, but also to provide a relevant review for daily practice. This course has top Mayo Clinic faculty and unparalleled content and experience proven learning techniques to enhance learning and recall. You may find additional course details on the course website: <https://ce.mayo.edu/internal-medicine/node/6473>.

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 \$2,500.00. 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 and breaks. If you are interested in exhibiting at our course, please complete and return the provided Exhibitor Agreement form and payment **before July 15, 2016**. This agreement may be substituted with your company's standard Letter of Agreement form. Please make payment payable to Mayo Clinic and send payment to my attention at the address below. For your convenience, our Federal tax identification number is 41-6011702.

We look forward to the success of our Physician Assistant Board Review course and hope you will be able to join us this coming August. If you have any questions or your company requires completion of a web-based application, please feel free to contact me.

Sincerely,

Kathy Fuqua  
Education Administration Coordinator  
Mayo School of Continuous Professional Development  
200 First Street SW  
Plummer 2-60  
Rochester, MN 55905  
[fuqua.kathy@mayo.edu](mailto:fuqua.kathy@mayo.edu)  
Phone: 507-266-9815



## Mayo School of Continuous Professional Development (MSCPD) Exhibitor Agreement

|                 |  |
|-----------------|--|
| Activity Title  | Physician Assistant Board Review: A comprehensive review for Physician Assistants and Nurse Practitioners 2016 |
| Activity Number | 2016R439   |
| Location        | Mayo Clinic Campus, Leighton Auditorium, Siebens Medical Education Building, Rochester, MN                     |
| Dates           | Tuesday-Friday   |

Agreement between: ACCREDITED PROVIDER: Mayo Clinic College of Medicine – MSCPD AND:

|  |            |
|--|------------|
| Company Name (Exhibitor)<br>(as it should appear on printed materials)                           |            |
| Exhibit Contact (if different then exhibit Rep.)   |            |
| Name(s) of Representative(s) exhibiting:<br>(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 |

### TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at [www.accme.org](http://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 payment is due and collectible 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.
- 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.

**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 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:<br>Mayo Clinic<br>Mayo School of Continuous Professional Development<br>200 First St SW, Plummer 2-60<br>Rochester, MN 55905<br><br>Please identify <b>PABR</b> on the check. | For payment by credit card or wire transfer, please call the<br>MSCPD Registrar at 800-323-2688<br><br><i>Do not send credit card information via email or fax.</i> |

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

Complete and return this form along with your payment made to Mayo Clinic,  
 Federal Tax ID# 41-6011702 before **July 15, 2016** to:  
 Vicki Meyer, CMES/Kathy Fuqua, EAC  
 200 First St SW, Plummer 2-60  
 Rochester, MN 55905  
 T: 507-266-9815 F: 507-538-7234 E: [Fuqua.kathy@mayo.edu](mailto:Fuqua.kathy@mayo.edu)