MAYO CLINIC

6th Mayo Clinic Angiogenesis and Tumor Microenvironment Symposium:
From Basic Science to Clinical Challenges to Patient Care
August 22-24, 2014
Mayo Clinic and Kahler Hotel
Rochester, MN

Exhibitor Registration Form

Company Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Name of Representative In charge of exhibit: *(Please type or print name exactly as you want it to appear on the name tag)* _____

Mailing Address: _____

City/State/Zip Code: _____

Business Telephone: _____

Fax Number: _____

E-mail address: _____

Other Representative Names & Mailing Addresses: _____

_____

_____

Our company will: *(please check the appropriate box)*

☐ Pay a display fee of $_1500.00_ to exhibit our products/services at this course.

☐ Not be able to participate in this educational opportunity at this time. Please keep my name and company's address on file for future opportunities.

Display Information:

Does your display require:

- An 8' table for display? ☐ Yes ☐ No
- Electricity (110-volt power outlet)? ☐ Yes ☐ No
- Additional special equipment or requests? Please identify: _____

_____

_____

Complete and return this form to:

Colleen Allen

Department of Biochemistry and Molecular Biology
Guggenheim 1401
200 First Street SW
Rochester, Minnesota 55905
Fax: (507) 284-1767
Email: allen.colleen@mayo.edu

MAYO CLINIC

Mayo School of Continuous Professional Development

Exhibitor Agreement

Regarding the Terms and Conditions for a Commercial Exhibit

Activity Title: 6th Mayo Clinic Angiogenesis and Tumor Micro-Environment Symposium: From Basic Science and Clinical Challenges to Patient Care
Location: Minneapolis, MN Date(s): August 22-24, 2014

Agreement between: ACCREDITED PROVIDER (PROVIDER):
Mayo Clinic College of Medicine – Mayo School of CPD
AND
Commercial Company (EXHIBITOR): _____
Address: _____
Telephone _____ Fax _____ Email _____

The named EXHIBITOR wishes to exhibit at the above named activity for the amount of $1500.00

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." "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 in the place of the CME activity."**
- EXHIBITOR may distribute promotional materials at their exhibit space only. Distribution of pharmaceuticals or other samples is prohibited.
- All commercial support 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 sponsor, 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.
- PROVIDER **Federal Tax ID number is 41-1506440.**
  Please remit check payable to: Mayo Clinic- Mayo School of CPD. Please identify name of course on the check stub.

AGREED

EXHIBITOR Representative: _____ _____
(Name) (Signature)

PROVIDER Representative: _____
(Signature)

Complete and return this form to:
Colleen Allen
Department of Biochemistry & Molecular Biology
Guggenheim 14, Mayo Clinic, 200 First St. SW
Rochester, Minnesota 55905
Fax: (507) 284-1767
Email: allen.colleen@mayo.edu