



ANNUAL CLINICAL ASSEMBLY EXHIBITOR PROSPECTUS

MAY 2-5, 2018 • COCONUT POINT RESORT, BONITA SPRINGS, FLORIDA





ANNUAL CLINICAL ASSEMBLY EXHIBITOR PROSPECTUS



Connect with influential ophthalmologists and otolaryngologists from around the country at the 2018 Annual Clinical Assembly of the American Colleges of Ophthalmology and Otolaryngology — Head and Neck Surgery. In its 102nd year, this conference is a valuable means to grow your business and build your brand.

Come see the new face of AOCOO-HNS in beautiful Bonita Springs, Florida! The three-day meeting gives you access to these decision makers during meal times, breaks in lectures, at the popular welcome reception and much more.

EXHIBITORS ENJOY:

- An invitation to the beautiful outdoor kickoff party
- One 8x10 booth space
- Complimentary internet access
- Breakfast and snacks during breaks
- A list of all attendees
- Direct access to attending physicians, students, residents, program directors, faculty and more

Visit www.aocoohns.org/aca for accommodation information and conference schedule as it becomes available.



EXHIBITOR AGENDA

Please note times are subject to change.

WEDNESDAY, MAY 2ND

8:00 am – 7:00 pm Exhibit Setup

THURSDAY, MAY 3RD

6:30 am – 7:30 am Exhibits Open and Breakfast is Served

6:30 am – 3:00 pm Registration and Info Desk Open

6:30 am – 2:30 pm Exhibit Hours

7:45 am – 3:00 pm ACA Ophthalmology and Otolaryngology CME Courses

3:30 pm – 5:30 pm Workshops

FRIDAY, MAY 4TH

6:30 am – 7:30 am Exhibits Open and Breakfast is Served

6:30 am – 3:00 pm Registration and Info Desk Open

6:30 am – 2:30 pm Exhibit Hours

6:30 am Resident Lectures

7:00 am – 3:00 pm ACA Ophthalmology and Otolaryngology CME Courses and Workshops

SATURDAY, MAY 5TH

6:00 am – 7:00 am AOCOO-HNS Council of Residents and Fellows Meeting with Breakfast

6:30 am – 7:30 am Exhibits Open and Breakfast is Served

6:00 am – 1:00 pm Exhibit Hours

6:30 am – 12:30 pm Registration and Info Desk

7:00 am – 3:00 pm ACA Ophthalmology and Otolaryngology CME Courses and Workshops



SPONSORSHIP OPPORTUNITIES



PARAMOUNT SPONSOR (\$20,000)

Enjoy exclusive leverage as the Paramount Sponsor of the 2017 AOCOO year. This package includes 3 dedicated eblasts, full conference exhibit registration at the ACA, 5-night hotel stay at the ACA, your logo in the onsite magazine at the ACA, ample onsite signage, linked logo on our website, and your logo in our quarterly newsletter.

WIRELESS PARTNER (\$15,000)

Sponsor the wifi at the ACA and be sure to grab people's interest! You will enjoy customizable login information, your website as the landing page, ample signage, and your logo in the onsite magazine.

REGISTRATION COUNTER FLYERS (\$1000)

Put your flyer out at the general registration desk.

EXPO HALL ENHANCEMENTS (\$5000)

Sponsor exciting surprises in the expo hall that attendees are sure to love. Think massage chairs, smoothie bars, cappuccino carts, and more!

LANYARDS (\$7000)

HOTEL ROOM KEYS (\$7000)

BREAKFAST (\$5000 PER DAY)

LUNCH (\$5000 PER DAY)



EXHIBIT RULES AND REGULATIONS

Program Purpose: The AOCOO-HNS Foundation is committed to providing the highest quality continuing medical education by developing, monitoring, and maintaining educational standards for ophthalmology, otolaryngology-head and neck surgery, and facial plastic surgery. Consistent with this goal is the recognition that continuing medical education for the members is essential.

The CME programs sponsored by the AOCOO-HNS Foundation are designed to assist in keeping the members informed of pertinent new developments in the diagnostic and therapeutic aspects of patient care as they relate to ophthalmology, otolaryngology-head and neck surgery, and facial plastic surgery. The scope of the programs offered by the AOCOO-HNS Foundation is a result of recommendations by the Foundation Board of Directors and the Professional Program Committee Chairmen and Members, Executive Meeting Staff, and attendees.

Acceptance of Exhibits: The booth exhibitor must first complete an application, including appropriate payment. This application is subject to the approval of the management. The right is reserved to refuse application for exhibits.

Space Assignment: Upon receipt of your application, a confirmation and receipt will be sent. Booth assignment is on a first-come first-served basis the day of setup.

Payment: The cost of each booth exhibit is \$3,000 per booth.

Cancellation Policy: (a) If a company cancels between thirty-one (31) and sixty (60) days prior to the opening day of the meeting, it will be responsible for twenty percent (20%) of the total cost; or (b) if a cancellation occurs thirty (30) days or less prior to the opening day of the meeting, the company will be responsible for payment of the full cost.

General Conduct: The following practices are prohibited: (a) noisy electrical or other mechanical apparatus interfering with other exhibitors; (b) canvassing or distributing any material outside the exhibitor's own space; (c) publicizing and/or maintaining any extracurricular activities, inducements, demonstrations, or displays away from the exhibit area during the meeting and exhibit hours; or (d) contests, lotteries, raffles, games of chance, or any unauthorized give-away items.

Liability: Exhibitor acknowledges that the AOCOO-HNS Foundation and the Hyatt Regency Coconut Point do not maintain insurance covering the exhibitor's property and that the exhibitor is responsible to obtain business liability insurance to cover damage or loss.

Setup: Exhibitors may set up on Wednesday, May 2nd any time from 8:00 am-7:00 pm.

You are reminded, however, that this is an open area, and you have the primary responsibility for safeguarding your merchandise. The AOCOO-HNS Foundation and the Hyatt Regency Coconut Point assumes no liability for loss or damage through any cause of goods, exhibits, and other material owned, rented, or leased by the exhibitor.

Exhibit Hours: As a courtesy to the registrants and your fellow exhibitors, the AOCOO-HNS Foundation requests that your company representative be available at your tabletop exhibit during the following seminar hours listed above in the agenda.

Breakfast, Coffee Breaks and Lunch: Continental breakfast, lunch and coffee breaks will be served all days in the exhibit area.

General: All matters and questions not covered by these regulations are at the discretion of the AOCOO-HNS Foundation and/or Executive Meeting Staff.

These regulations may be amended at any time.



ANNUAL CLINICAL ASSEMBLY 2018 EXHIBITOR REGISTRATION FORM

Please type or print clearly:

To register for additional sponsorships, go to page 7

Company Name

Phone Number

Fax Number

Address

City

State

Zip Code

Exhibitor Fees

- Entire Conference \$3,000 Partial \$1,200/Day (choose your days)
- Thursday, May 3 Friday, May 4 Saturday, May 5

Table Choices

See attached floor map for table location options. Please note that tables will be assigned on a first-come-first-served basis. Should all of your selections be taken, an AOCOO staff member will be in touch for alternate locations.

First Choice: _____ Second Choice: _____ Third Choice: _____

Name Badges for Onsite Representatives: _____

PAYMENT INFORMATION

Total amount enclosed: \$ _____

Check enclosed for the total amount of \$ _____

Bill my credit card for the amount of \$ _____

Name on card _____

Card # _____ Exp. Date _____ CVV # _____

Check One:

- AMEX
 VISA
 MC
 DISCOVER

REQUIRED

I have included in my email to knoonan@conventusmedia.com:

- My exhibitor registration form My 150-250 word company bio
- One low-res and one high-res version of my company logo The names of my company representatives

Exhibitors must stay until the end of exhibit hours for all days that they are registered. Packing up and leaving early disrupts the flow and integrity of the entire room. Therefore, all credit card information will be kept on file, and \$500 will be charged to any exhibitor that packs up and leaves early without the consent of an AOCOO-HNS representative.

Cancellation policy: Any cancellations that are received 3 months or less prior to the conference will not be refunded.

Email completed forms to: Kathleen Noonan • (781) 375-8584 • knoonan@conventusmedia.com



ANNUAL CLINICAL ASSEMBLY 2018 SPONSORSHIP REGISTRATION FORM

Please type or print clearly:

| | | |
|----------------|----------------|----------------|
| Company Name | Phone Number | Fax Number |
| Address | City | State Zip Code |
| Contact Person | E-mail Address | |

SPONSORSHIP SELECTIONS

Conference Sponsorship

Please choose your level of sponsorship:

- Paramount:** \$20,000
- Wireless Partner:** \$15,000

A La Carte Sponsorship

- Registration Counter Flyers :** \$1000
- Expo Hall Enhancements:** \$5000
- Lanyards:** \$7000
- Hotel Room Keys:** \$7000
- Breakfast:** \$5000 per day
- Lunch:** \$5000 per day

PAYMENT INFORMATION

Total amount enclosed: \$ _____

Check enclosed for the total amount of \$ _____

Bill my credit card for the amount of \$ _____

Name on card _____

Card # _____ Exp. Date _____ CVV # _____

Check One:

- AMEX
- VISA
- MC
- DISCOVER

REQUIRED

I HAVE INCLUDED IN MY EMAIL TO [KNOONAN@CONVENTUSMEDIA.COM](mailto:knoonan@conventusmedia.com):

- My sponsorship registration form
- One low-res and one high-res version of my company logo
- My 150-250 word company bio
- The names of my company representatives

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