

5TH ANNUAL COSMETIC CONFERENCE

EXHIBITOR REGISTRATION FORM

SPONSORSHIP

ELITE SPONSORSHIP \$20,000

2 available
Master Sponsorship of Annual Meeting
Sponsorship of Post Conference Workshop
4 Doctor Passes for Attendance of 2-day Workshop
10 Doctor Passes to Attend Annual Meeting
Premier 10x20 Booth
Thank you Billboard at Registration Desk
Billboard in Exhibit Hall During Annual Meeting
Billboard at 2-Day Workshop
6 Exhibitor Passes
10 Priority Points for 2011 Annual Cosmetic Conference
Full Page Advertisement in Program

DIAMOND SPONSORSHIP \$15,000

2 available
Sponsorship of Welcome Reception
6 Doctor Passes to Attend Annual Meeting
Premier 10x20 Booth
Thank You Billboard at Reception
Billboard in Exhibit Hall
6 Exhibitor Passes
8 Priority Points for 2011 Annual Cosmetic Conference
Full Page Advertisement in Program

PLATINUM SPONSORSHIP \$12,500

2 available
Sponsor of Faculty Dinner
4 Doctor Passes to Attend Annual Meeting
Premier 10x20 Booth
Thank You Billboard at Reception
Billboard in Exhibit Hall
4 Exhibitor Passes
6 Priority Points for 2011 Annual Cosmetic Conference
Half Page Advertisement in Program

GOLD SPONSORSHIP \$7,500

2 available
Sponsorship of DVD Set
Complimentary DVD of the meeting with name and logo
Premium 8' Exhibit Space
Billboard in Exhibit Hall
2 Exhibitor Passes
5 Priority Points for 2011 Annual Cosmetic Conference
Half Page Advertisement in Program

SILVER SPONSORSHIP \$5,000

2 available
Sponsorship of Lunches
Premium 8' Exhibit Space
Billboard in Exhibit Hall
2 Exhibitor Passes
4 Priority Points for 2011 Annual Cosmetic Conference
Quarter Page Advertisement in Program

STANDARD SPONSORSHIP \$2,500

25 available
One 8' table
2 Exhibitor Passes
2 Priority Points for 2011 Annual Cosmetic Conference
Company Listing in Program

EXHIBIT HOURS:

Thursday, November 11th	
Exhibit Hall Hours	6:30am-8:00pm
Welcome Reception in Exhibit Hall	6:00pm-8:00pm
Friday, November 12th	
Exhibit Hall Hours	6:30am-6:00pm
Saturday, November 13th	
Exhibit Hall Hours	6:30am-4:30pm
Exhibitor Set-up, Wednesday, Nov 10th	3:00pm-8:00pm
Exhibitor Move-out, Saturday Nov 13th	4:30pm-9:00pm

REGISTRATION FORM:

Company: _____

Contact Name: _____

Contact Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Type of Sponsorship: _____

Description of Products & Services: _____

I have read the information contained in the exhibitor service manual and agree to abide by all requirements set forth and to conform with all correspondence from FAME, AAOCP, NSOCP, NSOCPs, AAOCPM, AAOCD and Ritz-Carlton Dove Mountain Resort, or its agent(s). Exhibitors who do not abide by these guidelines will be shut down immediately.

Authorized Exhibitor Representative Signature _____

Date _____

PAYMENT TYPE:

☐ VISA

☐ MASTERCARD

☐ AMEX

Name on Card: _____

Card# _____ Total Amount: _____

Exp Date _____ Vcode: _____

Signature _____

If paying by check, make check payable to:
Foundation for the Advancement of Medical Education
8000 S Kolb Rd, Ste 103, Tucson, AZ 85756

CANCELLATION POLICY:

Registration is 50% refundable only if a written cancellation is received by Sept 1, 2010. NO REFUND will be given after this date for any reason.

Hotel Accommodations:

NSOCP has secured a block of rooms at the Ritz-Carlton Dove Mountain Resort. Please make your reservations by October 20th to obtain the special rate of \$199/night. Call 800-241-3333 or simply go online at www.ritzcarlton.com and use Reservation Code# NSCNSCA.

For more information contact:
National Society of Cosmetic Physicians
phone: 520-574-1050
fax: 520-545-1254

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