



EMORY
UNIVERSITY
SCHOOL OF
MEDICINE

Office of Continuing Medical Education
1462 Clifton Road, NE, Suite 276
Atlanta, GA 30322
404-727-5695 (telephone) 404-727-5667 (fax)

EXHIBIT INFORMATION

Southern Pain Society Annual Scientific Meeting in conjunction with the Mississippi Pain Society, LA Society of Interventional Pain Physicians and MS Society of Interventional Pain Physicians:

Practical Pain Management in 2010

October 1-3, 2010

The Westin New Orleans Canal Place
New Orleans, LA

Emory University School of Medicine is offering Exhibitors an opportunity to interact and share information about their products and services with pain medicine physicians and other health care professionals from throughout the Southeast.

Attendees: 150-200 physicians, nurse practitioners, physician assistants, pharmacists, physical therapists, psychologists, nurses and others interested in pain medicine.

Cost: \$1,500

Exhibitor One draped 6' table in Exhibit Hall (assigned by Emory coordinator)

Package: Name badges for exhibitors, if received prior to September 24, 2010
List of attendees (name, city, state)

Setup: Friday, October 1, 2010, 4:00 pm – 9:00 pm

Exhibit Hrs: Saturday, October 2

Breakfast: 7:00 am – 8:00 am

AM Break: 9:45 am – 10:15 am

Lunch: 12:00 – 1:00 pm

PM Break: 2:45 pm – 3:15pm

Sunday, October 3

Breakfast: 7:00 am – 8:00 am

AM Break: 9:45 am – 10:15 am

Deadline: **September 3, 2009.** Exhibitor Registration form and payment must be submitted prior to this date. Space is first come first served. Emory University Office of CME cannot guarantee space availability after this date.

Exhibit Space: All exhibitors are provided one 6' table, table linen, 2 chairs and a wastebasket. Additional requirements/needs are to be provided by the Exhibitor or requested through the Emory University Office of CME on the attached Exhibitor Registration Form. We will make every effort to accommodate specific requests. Additional charges are the responsibility of the Exhibitor.

Shipping: **Items may be shipped no more than 3 days prior to the event:**

Westin Canal Place

ATTN: Southern Pain Society Meeting

100 Rue Iberville

New Orleans, LA 70130

504-566-7066

EXHIBITOR REGISTRATION FORM
Southern Pain Society Annual Meeting
October 1-3, 2010

General Information	Company Name
	Contact Name
	Address
	Email Fax Number
	Representatives Attending Event (for Name Badges)

Additional Needs	<input type="radio"/> Electricity <input type="radio"/> Early Exhibit Setup Friday, October 1
	<input type="radio"/> Extension Cord
	<input type="radio"/> Additional Needs (i.e. proximity to other exhibitors or special equipment)
	Please note: Placement is reserved on a first come, first served basis. Please respond no later than September 3, 2009

Payment Information	Payment \$1,500: <input type="radio"/> Check (made payable to Emory University)
	<input type="radio"/> Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
	Name on Card: _____
	Credit Card Number: _____
	Exp Date: _____
	Signature: _____

Mail this form with check to Emory University Office of CME, 1462 Clifton Road, NE, Suite 276, Atlanta, GA 30322. Or fax to 404-727-5667. Call Melissa Boone at 404-727-1626 with any questions.