

Virginia Osteopathic Medical Association
in conjunction with the
Edward Via College of Osteopathic Medicine
2010 Fall CME Conference
Hotel Roanoke– Roanoke, Virginia
September 24-26, 2010

Exhibitor Prospectus and Contract

WHERE

The Hotel Roanoke, 110 Shenandoah Ave., Roanoke, VA 24016 – Phone (540) 985-5900

EXHIBIT SETUP/DISMANTLE

Exhibit setup begins Friday, September 24th at 1:00PM. Dismantling will be permitted on Saturday, September 25th after 3:00 PM.

EXHIBIT HOURS

The exhibit area will be open on Friday 9/24 from approximately 2-3 PM and on Saturday 9/25 from 7:30 AM – 3 PM, subject to change. Please **DO NOT DISMANTLE EARLY**.

CONFERENCE TOPICS

Medical updates and OMT review.

ATTENDANCE

An estimated 75 – 100 Physicians from Virginia are expected to attend, as well as numerous faculty and medical students from VCOM.

RESERVING EXHIBIT SPACE

Complete the attached application and Letter of Agreement and return by September 1, 2010 to:

VOMA
48 East Square Lane
Richmond, VA 23238
(804) 784-2204
Fax: (804) 784-2231
Email: voma@voma-net.org

For further questions contact Maria Harris at (804) 784-2204. Due to the limited exhibit space, it is expected that the available space will fill quickly. Please reserve your space as soon as possible. **YOU MAY EMAIL THE FORM TO RESERVE YOUR SPACE AND SEND THE CHECK AT A LATER DATE.**

WHAT IS PROVIDED

A skirted six -foot by 30 inch table is provided. If more space is needed, it will be necessary to reserve additional exhibit space. Electrical needs must be indicated in advance and extension cords must be supplied by the individual exhibitor. *All companies exhibiting will receive a special thanks and recognition in our conference program and a list of pre-registered conference attendees.*

HOTEL ROOM RESERVATIONS

Representatives attending the conference may reserve hotel rooms at the conference rate of \$129 per room per night based on single/double occupancy (\$10 each additional person). To secure your reservations, please call the hotel directly **before August 23rd** at 540-985-5900 or toll free at 866-594-4722 (between the hours of 8:00 am and 5:30 pm Monday thru Friday) and ask for the **Virginia Osteopathic Medical Association room block.**

Exhibitor Rules and Regulations

I. Exhibit Purpose

Exhibits are intended for educational and informational purposes to improve osteopathic education, practice and research. All materials/equipment should not contain any inaccurate or misleading information. VOMA/VCOM reserves the right to determine if an exhibit meets the objectives and standards of VOMA/VCOM. Exhibits should complement the meetings and sessions by enabling registrants to see, hear, examine, question and evaluate the latest developments in equipment, supplies and services relevant to osteopathic physicians.

II. Eligibility to Exhibit

Exhibitors must agree to meet the objectives stated above. Exhibitors may sell merchandise or services in the exhibit area. No product, apparatus, instrument, device or drug that is subject of litigation pending before the Food and Drug Administration may be exhibited. In cases of pending compliance or noncompliance with the FDA items can only be exhibited if a disclaimer is posted stating: FDA LISTING PENDING. All products or services exhibited must comply with all state and local regulations and with all FDA regulations for such products and services, except as provided above.

III. Assignment of Booth Exhibits

Contracts and payments in full for booth exhibits are accepted on a first-come, first served basis. To ensure that booth space has been reserved, your application and payment in full should be submitted as soon as possible. Reservations are not assured until application and payment are both received.

IV. Insurance

Each exhibiting company is required to insure itself against property loss or damage and against liability for personal injury.

V. Booth Cancellations and Refunds

The cost for a booth exhibit will be \$495. VOMA must be notified of booth cancellations, in writing on company letterhead, by **September 10, 2010**. Prior to this date, refunds will include the exhibit fee minus a 20% handling fee. No refund will be made for cancellations after that date.

VI. Registration and Badges

All exhibitors should register their personnel in advance and name badges are encouraged for identification purposes.

VII. Installation and Removal of Exhibits

The exhibit area will be available on Friday, September 24th at 1:00 PM for exhibit preparation. Exhibits will open at 2:00 PM on 9/24. Dismantling may occur after 3:00 PM on Saturday, September 25, 2010. Exhibit times are subject to change.

III. Failure to Occupy Space

Unless previously arranged, space must be occupied by the exhibiting company by 2:30 PM on Friday, September 24, 2010, or will be forfeited without refund to the exhibitor and the space may be resold or used by VOMA.

IV. Exhibitor Activities

VOMA/VCOM reserves the right to restrict exhibits that, in their judgment, detract from the overall professional demeanor of the exhibit area. This reservation includes persons, objects, conduct, printed materials or anything of a character that may be objectionable to the exhibit area as a whole. Expulsion of or restrictions placed on an exhibitor may not give rise to a claim for any refund of rentals or other exposition expenses. Smoking in the exhibit hall is strictly prohibited. Exhibitors will be responsible for any damage done to the hotel building by themselves or their employees.

V. Subletting of Space

Exhibitors may not assign, sublet or appropriate the whole or any part of the space allocated without the express written consent of VOMA.

VI. Security

After hours, VOMA/VCOM shall not be held responsible for the lost or damage to any material for any cause at any time during the conference and encourages the exhibitor to exercise normal precautions to prevent loss or damage.

XII. Liability

The exhibitor indemnifies and agrees to hold harmless VOMA/VCOM and The Hotel Roanoke and their owners, officers, directors, employees and agents from and against any actions, losses, costs, damages, claims and expenses (including attorney's fees arising from any damages to property or bodily injury to exhibitors, his agents, representatives, employees by reason of the exhibitor's occupancy or use of the exhibitor facilities). Upon signing the contract, the exhibitor expressly releases the foregoing institutions, individuals and committees from any and all claims for loss, damage or injury. This also includes the period of storage prior to and following the meeting.

XIII. Cancellation

Should any situation beyond the control of VOMA arise to prevent the 2010 Fall Conference from occurring, VOMA/VCOM will not be held liable for any expenses incurred by the exhibitor except the rental cost of the booth, which will be refunded in full.

APPLICATION

**Virginia Osteopathic Medical Association/
Edward Via College of Osteopathic Medicine
2010 Fall CME Conference
September 24-26, 2010**

(Please also complete the Sponsorship Letter of Agreement)

Company Name: _____

Contact Name: _____

Address: _____

Telephone: _____ Cell: _____

Fax: _____ Email: _____

Authorizing Signature: _____

Representative(s) Attending: _____

We will need electricity: Yes: _____ No: _____

_____ Enclosed (or will mail separately) is the \$495.00 exhibit fee.

_____ Enclosed (or will mail separately) is an unrestricted Educational Grant funding in the amount of \$_____.

VOMA Tax ID # is 54-1067816.

This application, properly executed, constitutes a valid and binding contract once reviewed and approved by VOMA. Please read the *Exhibitor Rules and Regulations* provided with this application prior to signing. Your signature on this form verifies your agreement and compliance with the terms and conditions outlined in the *Exhibitor Rules and Regulations*.

Please complete this application and mail, with check payable to the Virginia Osteopathic Medical Association (VOMA), 48 East Square Lane, Richmond, VA 23238. Thank you in advance for your support of VOMA.

Questions?? Please do not hesitate to call: Maria Harris at (804) 784-2204.

Fax: (804) 784-2231

E-mail: voma@voma-net.org

Sponsorship Letter of Agreement
**Virginia Osteopathic Medical Association/
Edward Via College of Osteopathic Medicine
2010 Fall CME Conference**

Title of CME Activity: 2010 Fall CME Conference

Location: Hotel Roanoke, 110 Shenandoah Ave., Roanoke, VA

Commercial Supporter (company name / branch) _____

Contact Person from Group: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

The above company wishes to provide support for the named continuing medical education activity by means of monies to support: (circle which options below):

A: Speaker(s)

To include all expenses _____ Travel only _____ Honorarium only _____

B: Support for catering function(s) (specify): _____
in the amount of \$ _____ (see 10 d. below)

C: Other (e.g. support for brochure publication, distribution, AV equipment, etc.) _____

D: Exhibit only _____

VOMA's tax ID number is 54-1067816.

Please read the Terms and Conditions and sign the agreement in the space provided below. Thank you in advance.

Terms and Conditions

1. *Statement of Purpose:* Program is for scientific and educational purposes only and will not promote the company's products, directly or indirectly.

2. *Control of Content and Selection of Presenters and Moderators:* Sponsor is ultimately responsible for control of content and selection of presenters and moderators. Company, or its agents, will respond only to sponsor initiated requests for suggestions of presenters or sources of possible presenters. Company will suggest more than one name (if possible), will provide speaker's qualifications, will disclose financial or other relationships between company and speaker, and will provide this information in writing. Sponsor will record role of company, or its agents, in suggesting presenter(s); will seek suggestions from other sources, and will make selection of presenter(s) based on balance and independence.

3. *Disclosure of Relationship:* Company, or its agents, will disclose any significant relationship between the sponsor and the company (e.g. grant recipient) or between individual speakers or moderators and the company.

4. *Involvement in Content:* There will be no "scripting", emphasis, or influence on the content by the company or its agents.

5. *Ancillary Promotional Activities:* No promotional activities will be permitted in the same room or obligate path as the educational activity. No product advertisements will be permitted in the program room.

6. *Objectivity and Balance:* Sponsor will make every effort to ensure that the data regarding the company's products (or competing products) are objectively selected and presented, with favorable and unfavorable information and balanced discussion of prevailing information on the product(s) and/or alternative treatments.
7. *Limitations of Data:* Sponsor will ensure, to the extent possible, disclosure of limitations of data, e.g. research, interim analyses, preliminary data, or unsupported opinion.
8. *Discussion of Unproved Uses:* Sponsor will require that presenters disclose when a product is not approved in the United States for the use under discussion.
9. *Opportunities for Debate:* Sponsor will ensure opportunities for questioning or scientific debate.
10. *Independence of Sponsor in the use of Contributed Funds:*
 - a. Funds should be in the form of unrestricted monies made payable to the Virginia Osteopathic Medical Association.
 - b. All other support associated with this CME activity (e.g. distributing brochures, preparing slides) must be given with the full knowledge and approval of the Virginia Osteopathic Medical Association.
 - c. No other funds from the commercial company will be paid to the program director, faculty, or other involved with the CME activity (e.g. additional honoraria, extra social events, etc.)
 - d. Funds may be used to cover the cost of one or more modest social activities held in conjunction with the educational program which furthers the CME educational experience and/or allows an educational discussion or exchange of ideas.

The Commercial Supporter agrees to abide by all requirements of the AOA Guidelines for Relationships between Accredited Sponsors and Commercial Supporters of CME.

The Accredited Sponsor agrees to: 1) abide by the AOA Guidelines for Relationships between Accredited Sponsors and Commercial Supporters of CME; 2) acknowledge educational support from the commercial company in program brochures, syllabi, and other program materials; and 3) upon request, furnish the commercial supporter a report concerning the expenditure of the funds provided.

AGREED

Commercial Company Representative _____

Signature: _____ **Date:** _____

VOMA Representative _____

Signature: _____ **Date:** _____