



Exhibitor Prospectus

Annual Meeting

March 24-25, 2017

Omni Grove Park Inn, Asheville, NC

The South Carolina Neurological Association is proud to extend partnership opportunities for all commercial supporters at the 2017 Annual Meeting. This year's meeting will be held March 24-25 at the Omni Grove Park Inn in Asheville, NC. The SCNA Annual Meeting provides neurologists, physicians and other medical professionals interested in the practice of neurology an opportunity to stay informed about the latest clinical advances and research findings in the field. Your participation is welcome as we expect to host approximately 50-75 neurologists from South Carolina, North Carolina, Georgia and Tennessee.

The South Carolina Neurological Association offers a variety of exhibitor packages and benefits to our partners, which provide your company with an excellent opportunity to network and nurture successful relationships with the neurological community. Exhibitor applications and agreements can be faxed to the SCNA office (803-254-3773), mailed to 1215 Anthony Avenue, Columbia, SC 29201 or emailed to shelby.walker@scneuro.org. For further questions regarding the exhibitor packet please contact shelby.walker@scneuro.org. Thank you for supporting the South Carolina Neurological Association!

Exhibit Hall Schedule

Friday, March 24

- 3:00 - 4:00 pm Exhibitor set-up
- 4:00 - 6:00 pm Welcome reception in exhibit hall

Saturday, March 25

- 7:00 am - 1:00 pm Exhibits open
- 7:00 - 7:45 am Breakfast buffet/ exhibits
- 10:00 - 10:30 am Refreshment break in exhibit hall

Meeting Venue

The Omni Grove Park Inn group rate deadline is February 7, 2017.

Rate: \$289/night + taxes

Group Name: SC Neurological Association

Reservations: 800-438-5800

Online Reservations: <https://www.omnihotels.com/hotels/asheville-grove-park/meetings/sc-neurological-association>

Please select a level of participation

- Exhibitor \$2,000
 - Exhibit space at SCNA Annual Meeting
 - Two company representatives may attend annual meeting
 - Recognition of partnership in annual meeting program
- Bronze Level \$3,000
 - Exhibit space at SCNA Annual Meeting
 - Three company representatives may attend annual meeting
 - Recognition of partnership in annual meeting program
 - Recognition of partnership in one SCNA member newsletter (company logo)
 - Recognition of partnership on SCNA Facebook & Twitter pages
- Silver Level \$4,000
 - Exhibit space at SCNA Annual Meeting
 - Four company representatives may attend annual meeting
 - Recognition of partnership in annual meeting program
 - Recognition of partnership in one SCNA member newsletter (company logo & short description)
 - Recognition of partnership on SCNA Facebook & Twitter pages
 - Recognition of partnership on SCNA website (company logo)
- Gold Level \$5,000
 - Exhibit space at SCNA Annual Meeting
 - Up to five company representatives may attend annual meeting
 - Recognition of partnership in annual meeting program
 - One-half page ad regarding partnership in one SCNA member newsletter
 - Recognition of partnership on SCNA Facebook & Twitter pages
 - Recognition of partnership on SCNA website (company logo & short description)
 - Recognition of partnership on SCNA meeting signs (SCNA retains rights to limit dimensions)
 - Opportunity to provide information to be included in an SCNA email blast(s)
 - Assistance with opportunity to have product theatre time at the annual meeting
 - Reserved booth in premium location

Exhibiting Company Booth Information

Company Name: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Company Phone Number: _____ Company Website: _____

Direct Contact Information (For business correspondence)

Contact Name/Job Title: _____

Work/Mobile Number: _____ Fax: _____ E-mail Address: _____

Payment receipts and exhibitor updates will be sent via E-mail

On-site Representative(s) /E-mail Address/Phone Number

1. _____ 2. _____

3. _____ 4. _____

5. _____

of representatives attending Friday reception:

Please review selected level of participation for the number of on-site representatives permitted at company booth. The fee for additional company representatives is \$25 per person.

Payment Information

Total: \$ _____ Check Enclosed

Credit Card: Visa MasterCard AmEx Discover

Credit Card Number: _____ Cardholder Name: _____

Card Billing Address: _____ City: _____ State: _____

Zip Code: _____ Expiration: _____ Security Code: _____

Signature: _____

Exhibitor Agreement for Space at the 2016 SCNA Annual Meeting

Thank you for your interest in exhibiting at the 2017 SCNA Annual Meeting that is scheduled March 24-25, 2017 at the Omni Grove Park Inn, Asheville, NC. Please sign and date in the space below to acknowledge and agree to the following terms and conditions:

1. Exhibitor will occupy space in the exhibit hall during the designated dates and time frames.
2. Promotional Materials, collateral or act activities must be confined within the limits of the exhibitor's purchased space.
3. Exhibitor agrees to pay for the total cost of the booth as noted on the application. Exhibit space may be reserved with 50% deposit. Remaining cost must be paid no later than February 10, 2017. If Exhibitor does not make payment when required, SCNA may offer the Exhibit space to others.
4. The exhibitor has until February 10, 2017 to cancel and receive a refund, minus \$100 cancellation fee. There will be NO REFUNDS PROVIDED for cancellation after February 10, 2017. If the SCNA cancels the conference due to inclement weather or any other event beyond its control, SCNA will provide exhibitor with a credit toward exhibit space at a future SCNA conference. The amount of the credit will equal the amount paid by the exhibitor up to the date of cancellation.
5. Exhibitor agrees to maintain the highest level of integrity at the conference and in all interactions with meeting attendees.
6. Exhibitor agrees to indemnify and hold harmless SCNA, its affiliates, and their respective officers, directors, members employees and agents from and against all claims, demands, damages, judgments, losses, penalties, liabilities, liens and expenses incurred by any of them as a result of or relating to any breach of Exhibitor's obligations under this Agreement.
7. This Agreement will be interpreted in accordance with South Carolina law.

Agreed to and accepted by: _____

Company Name: _____ Company Representative (Please print): _____

Title: _____

Signature: _____ Date: _____