

IH EXPO Exhibitor *Application Form*

IH Expo

The Integrated Health Expo offers IH professionals at the ASMBS 2023 Annual Meeting access to an exclusive area where they can enjoy lunch and network with Exhibitors at tabletop exhibits. Enjoy a dedicated lunch break to spend with this target audience in a more intimate setting!

Date: Monday, June 26th, 2023

Time: 12:00 PM - 1:30 PM

Exhibitor Check-In & Set-Up: 6/26/23 from 8:00 AM to 11:30 AM

Exhibit Break-Down: 6/26/23 from 1:30 PM to 5:00 PM

Included

- Provided - one 6ft by 30 Inches table with floor-length linen and two chairs
- Tabletop placement around ballroom perimeter with attendee lunch
- Limited space available
- Displays are limited to tabletop size and/or 6ft in length, as not to impede other Exhibitors
- Electric is not included. Additional fees may apply if electric is required.
- Assigned placement provided (3) weeks before the meeting

Benefits

- Dedicated lunch break to spend with this target audience in a more intimate setting
- Tabletop Exhibit recognition will be acknowledged in related promotional material and in the mobile app where the lounge is listed
- Signage at the entrance of the IH Expo
- Announcements of the IH Expo will be included in (3) marketing emails, (1) Facebook Post, and (1) Twitter post
- A list of exhibitors at IH Expo will be included in At-a-Glance
- Exhibitors, at own expense, may produce and install signage and/or pull-up banners inside the IH Expo; All graphics must be pre-approved by ASMBS.
- IH Expo Badges for (2) representatives

Rules

- You must exhibit during June 27-29 in the main exhibit hall to exhibit at the IH Expo
- A minimum of 10 tabletop exhibits are needed to make this opportunity a success.
- Space is limited. Exhibitors can purchase up to (2) tables. Additional tables may be available; inquire if interested.
- **Cancellation:** In the event the sponsor wishes to cancel their sponsorship, upon approval from the ASMBS Meeting, the funds may be transferred to a similar or like opportunity if time permits. No refunds are provided.

Contact and Mailing Information

Please enter the information exactly as it should appear in ASMBS records and publications.

Organization Information

Company name/branch: _____

Address: _____

City, State, Zip, Country: _____

Telephone: _____

Contact Person: _____ Title: _____

E-Mail Address: _____

Name Badge #1: _____ Name Badge #2: _____

Please note here if **electricity**, etc. needed for exhibit setup/operation: _____

(Electric is not included. Additional fees may apply if electric is required.)

Payment of Fees

- \$750 per table for Exhibitors _____ Number of Tables Requested
- \$500 per table for ASMBS Corporate _____ Total Amount to be Charged
Council Member Exhibitors

Payment Method

- Credit Card
- Check
- Wire
- Request Invoice

Please make checks or money orders payable to:
American Society for Metabolic and Bariatric Surgery
14407 SW 2nd Place | Suite F-3 | Newberry, FL 32669

Credit Card Details

Cardholder's Name: _____

Card Number: _____ Expiration: _____ CVV: _____

Billing Address: _____

Billing Address (continued): _____

For more information contact:

Morgan Matlock
14260 W. Newberry Road #418
Newberry, FL 32669
352.331.4900

Morgan@asmbs.org

Submit payment with invoice to:

American Society for Metabolic & Bariatric Surgery
Attn: Kim Carmichael AM23 - SR
14260 W. Newberry Road #418
Newberry, FL 32669

Note: This application will not become a binding contract until it is approved by ASMBS. Please type or print clearly. Morgan Matlock, Sponsorships & Exhibits Manager (352) 331-4900, ext. 121 or email:

morgan@asmbs.org