



Western Neuroradiological Society 49th Annual Meeting *Exhibitor Agreement*

NAME OF COMPANY

NAME OF REPRESENTATIVE(S) WHO WILL ATTEND

ADDRESS

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

PHONE

FAX

EMAIL

ELECTRICAL REQUIREMENTS

EXHIBIT FEE: \$ _____ EXHIBIT SPACE WILL CONSIST OF: Standard 6-Foot Draped Table and 2 Chairs

PAYMENT METHOD: VISA MASTERCARD AMERICAN EXPRESS CHECK, MADE PAYABLE TO WNRS, IS ENCLOSED

CREDIT CARD ACCOUNT NUMBER

CREDIT CARD EXPIRATION DATE

CARDHOLDER'S NAME

CARD HOLDER'S SIGNATURE

MAIL/FAX COMPLETED AGREEMENT WITH FULL PAYMENT TO: WNRS, P.O. Box 350, Springville, AL 35146, FAX: (205) 467-0195

Shipping Instructions: When shipping packages to the Grand Hyatt Kauai, the following information must appear on each package:

Grand Hyatt Kauai Resort & Spa
Name of Group- (WNRS)
Name of Person on Site, (Wendy Ryals)
Meeting Dates- (October 25-28, 2017)
1571 Poipu Road
Koloa, Kauai, HI 96756

Your shipment should arrive no earlier than October 23, 2017. If you need additional equipment, other than the electrical equipment/requirements listed above, arrangements must be made through the iicME office.

INDEMNITY AND HOLD HARMLESS AGREEMENT

It is hereby agreed that said company listed above will exhibit at the above mentioned meeting for the duration of the meeting. It is further agreed that said company shall Indemnify, Defend and Hold Harmless The International Institute for Continuing Medical Education, Inc., the Western Neuroradiological Society and the Grand Hyatt Kauai Resort & Spa, their owners, affiliated companies, agents, servants and employees from any and all lawsuits, damages and claims arising out of Injury or damages to displays, equipment and other property brought upon the hotel premises for said meeting. The exhibitor acknowledges that conducting marketing or promotional activities in any meeting area except for their assigned exhibit space is prohibited. Commercial interests may not engage in sales, promotional activities, or distribute product-specific advertisements while in the designated location of the CME activity. CME activity space includes, but is not limited to, lecture halls, break out rooms, and laboratory areas. Exhibitors and iicME agree to abide by the ACCME Standards for Commercial Support of Continuing Medical Education. Copy of this policy is available by request or on the ACCME website at http://www.accme.org. Any actions that are not in accordance with the above-stated policy may result in the removal of the exhibit company and its representative(s) from the meeting site, in which case no refund of exhibit fees will be given.

AGREED BY AUTHORIZED REPRESENTATIVE(S)

Exhibitor/Vendor

Signature:

Date:

Print Name:

Title: