

March 2017

Dear Valued Industry Partner:

The exhibit hall floor plans for the November 2017 AIMsymposium have been finalized and we are now open for registration. We hope you will be pleased with the layout, and we look forward to your participation in the 2017 meeting.

We offer five types of exhibiting opportunities, outlined below:

**SOUTH CORRIDOR, 2<sup>nd</sup> Floor**

**Monday, November 13, through Wednesday, November 17, 2017**

8'x10' space = \$5,500; Fee includes 4 complimentary badges to the AIMsymposium scientific sessions.

**Monday, November 13, ONLY**

8'x10' space = \$3,500; Fee includes 2 complimentary badges to the AIMsymposium scientific sessions.

**Tuesday, November 14, ONLY**

8'x10' space = \$3,500; Fee includes 2 complimentary badges to the AIMsymposium scientific sessions.

**Wednesday, November 15, ONLY**

8'x10' space = \$3,500; Fee includes 2 complimentary badges to the AIMsymposium scientific sessions.

**Thursday, November 16, ONLY**

8'x10 space = \$3,500; Fee includes 2 complimentary badges to the AIMsymposium scientific sessions.

All complimentary badges allow full access to the AIMsymposium scientific sessions and are for non-clinical company representatives only.

**Space assignment is on a first come, first choice basis and payment must be received at the time of registration to secure your preferred exhibit location. Please note that due to logistic considerations, the Organizing Committee will make the final determination as to space assignment.**

Please contact me, Steven Feld, with any questions by phone at (917) 446-9818, or via E-mail at [sfeld@veithsymposium.org](mailto:sfeld@veithsymposium.org).

Thank you for your continued support of the AIMsymposium. We look forward to a successful meeting again this year, one that not only meets, but exceeds your educational and exhibiting expectations.

Sincerely,

Steven J. Feld, Associate Director  
VEITHsymposium, AIMsymposium, AVIDsymposium  
Phone: (800) 987-9314, ext. 300  
Fax: (718) 549-3142  
E-mail: [sfeld@veithsymposium.org](mailto:sfeld@veithsymposium.org)

Jackie Simpson, Managing Director  
VEITHsymposium, AIMsymposium, AVIDsymposium  
Phone: (845) 368-0069  
Fax: (845) 368-2324  
E-mail: [jsimpson@veithsymposium.org](mailto:jsimpson@veithsymposium.org)

Jacob Cynamon, MD  
Chairman, AIMsymposium

# Industry Registration Form

## South Corridor, 2nd Floor 8x10 Display

Monday, November 13 to Thursday, November 16, 2017

November 2017

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13 <b>AIM</b>	14 <b>AIM</b>	15 <b>AIM</b>	16 <b>AIM</b>	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

**EXHIBIT FEE:** Exhibit Fee is nonrefundable after September 5, 2017. Exhibit Fee includes full access badges to the scientific sessions for 2 or 4 non-clinical company representatives.

**Please note: Payment must be received upon submission of this form to secure your preferred exhibit location.**

Monday, November 13 to **Wednesday**, November 15, 2017  
(4 complimentary badges) \$ 5,500

### ONE-DAY EXHIBIT FEE

Monday, November 13, 2017 (2 complimentary badges) \$ 3,500  
 Tuesday, November 14, 2017 (2 complimentary badges) \$ 3,500  
 Wednesday, November 15, 2017 (2 complimentary badges) \$ 3,500  
 Thursday, November 16, 2017 (2 complimentary badges) \$ 3,500

1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_ 3rd Choice \_\_\_\_\_

### New York Hilton-Midtown

1335 Avenue of the Americas, New York, NY 10019 (between 53rd and 54th Streets)

Company Name \_\_\_\_\_ Federal Tax ID Number \_\_\_\_\_

Contact Person \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Office Phone# \_\_\_\_\_ Fax # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Check  Amex \_\_\_\_\_ Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

VISA  MasterCard \_\_\_\_\_ Verification Code (3 or 4 digit security code on credit card) \_\_\_\_\_

Signature \_\_\_\_\_

### Inquiries:

**Steven Feld**  
**Phone: 800-987-9314 x300 or**  
**Cell: 917-446-9818**

E-mail:  
**sfeld@veithsymposium.org**  
 Copy to  
**exhibits@veithsymposium.org**

If paying by credit card, please return completed form with credit card information by e-mail or fax to  
**845-368-2324**

If paying by check, please make check payable to: **The Cleveland Clinic Educational Foundation** and mail with completed form to:

**VEITHsymposium**  
**4455 Douglas Avenue**  
**Suite 11E**  
**Bronx, NY 10471**

Please list the names and individual E-mail addresses of your 2 or 4 non-clinical company representatives.

Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

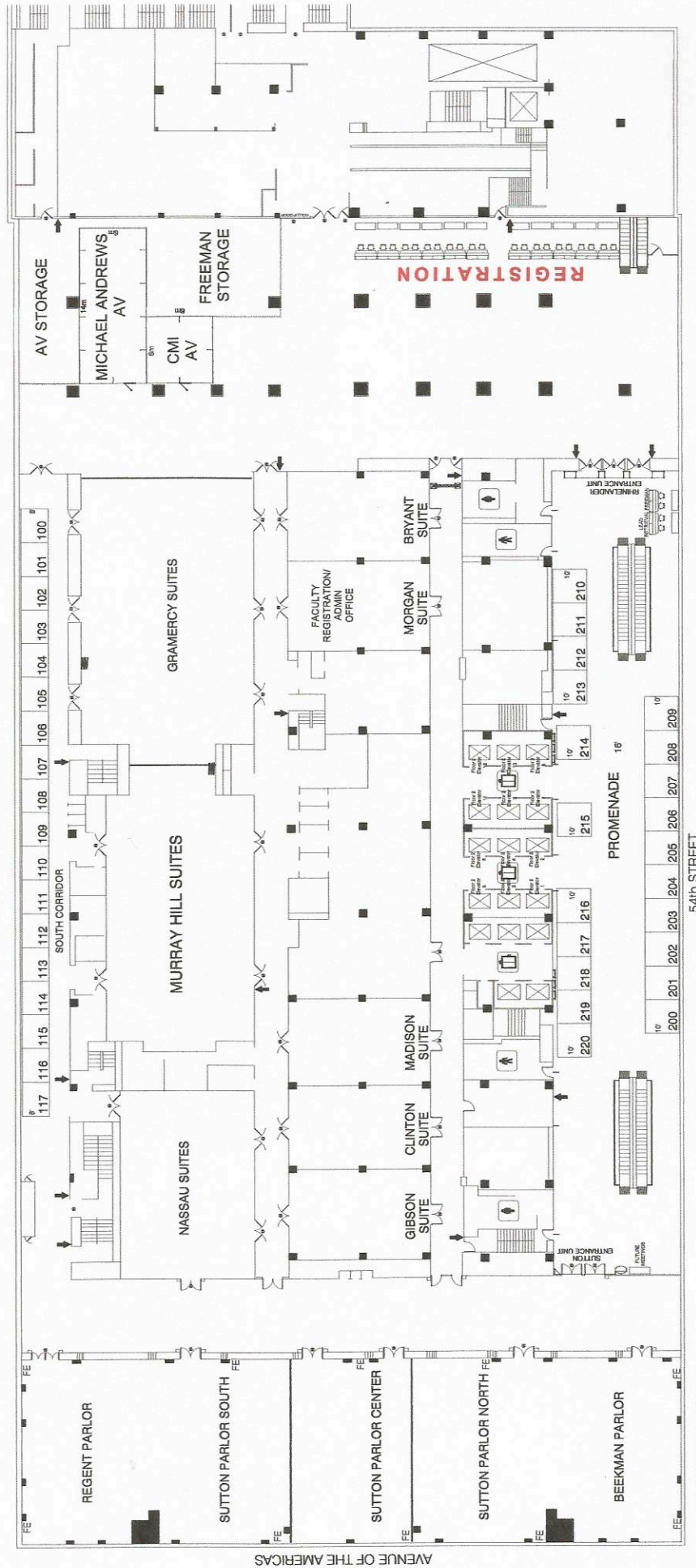
Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

There will be a \$100 (additional) fee for onsite/walk-in registrations and/or substitutions.

# VEITHsymposium/AIMsymposium/AVIDsymposium

NOVEMBER 13-18, 2017

2nd Floor Promenade & South Corridor



- FIRE ALARMS MUST BE VISIBLE AT ALL TIMES.
- INDICATED FIRE EXITS
- FE - FIRE EXTINGUISHER