

Industry Registration Form



South Corridor, 2nd Floor 8x10 Display

Monday, November 12 to Thursday, November 15, 2018

EXHIBIT FEE: Exhibit Fee is nonrefundable after September 4, 2018. 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.

November 2018

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

Monday, November 12 to **Wednesday**, November 14, 2018
(4 complimentary badges) \$ 5,500

ONE-DAY EXHIBIT FEE

- Monday, November 12, 2018 (2 complimentary badges) \$ 3,500
- Tuesday, November 13, 2018 (2 complimentary badges) \$ 3,500
- Wednesday, November 14, 2018 (2 complimentary badges) \$ 3,500
- Thursday, November 15, 2018 (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)

Inquiries:

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Copy to
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If paying by credit card, please return completed form with credit card information by e-mail to sfeld@veithsymposium.org

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

The Cleveland Clinic Educational Foundation
P.O. Box 931653
Cleveland, OH 44193-1082

If sending by overnight mail, please add 4100 West 150th Street above the City, State and Zip Code line.

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 _____

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 _____

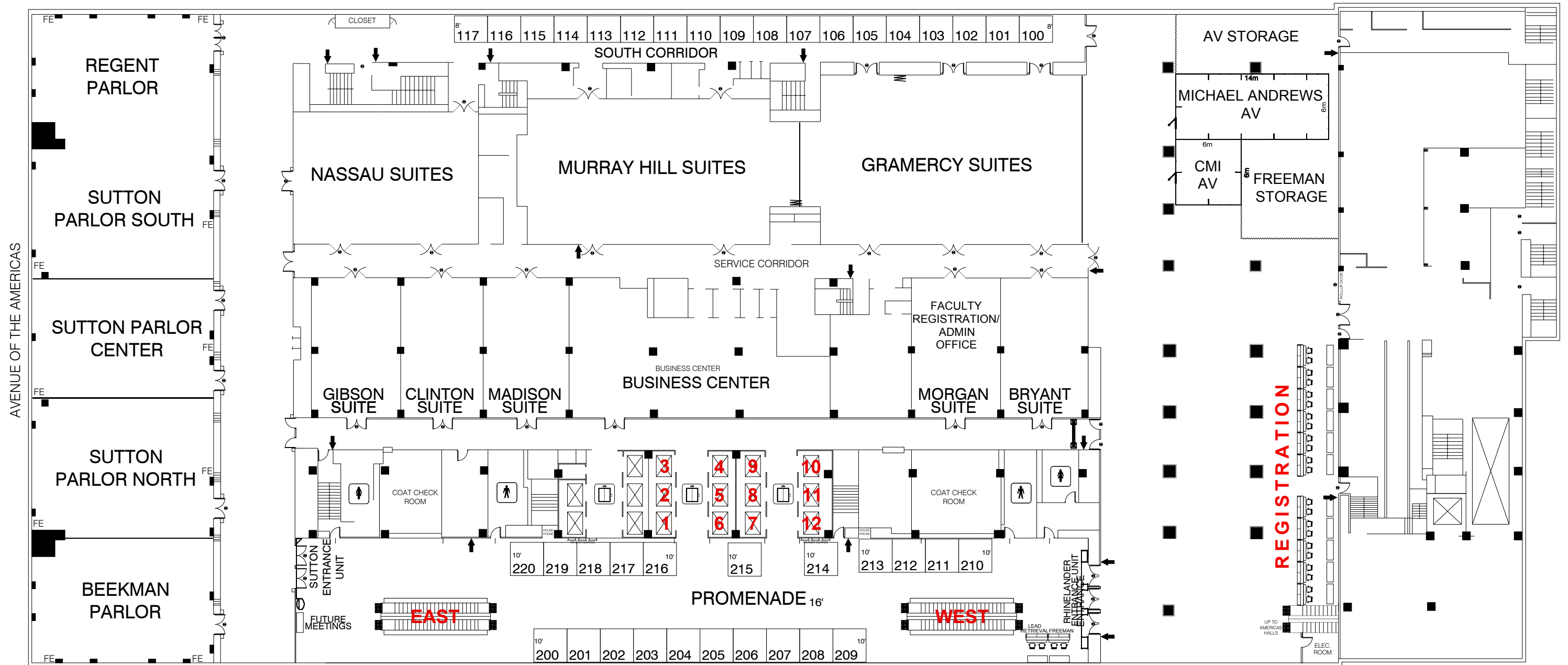
Name _____ Phone # _____ E-mail _____

Name _____ Phone # _____ E-mail _____

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

VEITHsymposium/AlMsymposium/AVIDsymposium

NOVEMBER 12-17, 2018



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

New York Hilton Midtown 2nd Floor Promenade & South Corridor