

**Texas Society of Child & Adolescent Psychiatry  
 Registration For Exhibit Space / Social Sponsorship  
 July 24-26, 2009 Annual Convention  
 Omni Fort Worth Hotel, Fort Worth TX**

Name of Firm \_\_\_\_\_

Street Address of Firm \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Name of Authorized Personnel \_\_\_\_\_ Title \_\_\_\_\_

*I have reviewed the Texas Society of Child and Adolescent Psychiatry exhibit policies and hereby agree to the terms and requirements as outlined:*

\_\_\_\_\_  
 Signature of Authorized Personnel

**Choose a support level (see support levels and benefits on next page)**

- Gold Level            \$3,000
- Exhibit Only            \$2,000

<b>TSCAP Tax ID: 75-1504593</b>
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**Representative(s) to Attend Meeting**

(Information will be used to print name badges. If additional space is needed, attach names to this application)

<i>Name of Representative</i>	<i>Mailing Address of Representative</i>	<i>City, State, Zip</i>	<i>Phone #</i>	<i>EMail</i>	<i>Fax #</i>

What general product line will your exhibit promote? \_\_\_\_\_

Who are your direct competitors/name of organization (for use in booth placement assignments)? \_\_\_\_\_

List two meetings at which your firm has exhibited in the past year:

1) \_\_\_\_\_ 2) \_\_\_\_\_

**\*\*If you would like to donate a door prize for the drawing to be held at the Saturday Afternoon Fiesta Reception please list your donation as follows and plan to have a representative attend to present the prize:**

\_\_\_\_\_

**Keep in mind sponsorship package offers added benefits and recognition at the meeting**

<b>Gold Level</b>	<b>\$3,000</b>
<b>Exhibit Only</b>	<b>\$2,000</b>

**Supporters have the opportunity to underwrite TSCAP events, including the welcome reception, continental breakfast, business meeting breakfast, AM / PM refreshment breaks and general meeting support.**

**If you are interested in supporting or co-sponsoring a particular event, please  check the appropriate box below:**

- Welcome Reception (\$3000)**
- Continental Breakfast - Saturday (\$3000)**
- Saturday AM Break (\$3000)**
- Saturday PM Break (\$3000)**

- Business Meeting Breakfast (\$3000)**
- Continental Breakfast - Sunday (\$3000)**
- Sunday AM Break (\$3000)**

- \* **Recognition in all on-site materials**  
*(Exhibit & Gold Level)*
- \* **Special recognition on event signage.**  
*(Gold Level)*
- \* **Course Syllabus**  
*(Exhibit & Gold Level)*

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**METHOD OF PAYMENT**

Check - Make Checks Payable to Texas Society of Child and Adolescent Psychiatry

VISA    MasterCard    AMEX   Credit Card # \_\_\_\_\_  
Expiration Date: \_\_\_\_\_   3 Digit Code on Back of Card on Right of Signature Panel \_\_\_\_\_  
Name of Cardholder (as it appears on card) \_\_\_\_\_  
Signature \_\_\_\_\_  
Address where you receive your credit card statement (include address, city, state, zip) \_\_\_\_\_

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**RETURN TO:**  
**TEXAS SOCIETY OF CHILD AND ADOLESCENT PSYCHIATRY**  
**401 WEST 15<sup>TH</sup> STREET, SUITE #675, AUSTIN, TX 78701**

**PHONE (512) 478-0605   FAX (512) 478-5223   EMAIL [tscapofc@aol.com](mailto:tscapofc@aol.com)**

# **TSCAP**

## **Exhibitor Policies**

### **Exhibits**

Exhibit space will require a minimum contribution of \$2,000.00. This support will guarantee the following:

1. One 6' draped table for display.
2. Listing as an "exhibitor" in on-site program brochure.

### **Dates/Hours of Exhibits**

Exhibits will be open from 6:30 pm-8:30 pm on Friday; 7:30 am-5:30 pm Saturday. Program attendees may visit the exhibit display during the 6:30 pm-8:30 pm Friday evening Welcome Reception; 7:30 am-8:00 am Continental Breakfast; 10:30 am-10:50 am Refreshment Break; 2:15 pm-2:35 pm Refreshment Break. The program schedule will specify when exhibits will be open and statements will be made throughout the program brochure encouraging members to visit the exhibits. The exhibit area will be available for set-up on Friday afternoon, from 2:00pm-5:30pm, and each exhibitor is responsible for promptly removing all materials from the exhibit area beginning at 5:30 pm on Saturday.

### **Size and Types of Exhibits**

Exhibit space will be limited to table-top displays. Exhibitors must conform to this space requirement, and should plan displays with this configuration in mind. Exhibitors shall be limited to those whose products or services are related to physicians' medical, professional or practice interests. The TSCAP reserves the right to screen applications for space and to accept only those which conform to these criteria. Unethical conduct or infraction of TSCAP policy will subject the exhibitor or his/her representatives to dismissal from the meeting. Should this occur, no refund of the exhibit fee will be made.

### **Disclosure of Investigational Uses of Products, Devices or Procedures**

All exhibitors will be required to follow the Food and Drug Administration (FDA) imposed rules and regulations on displayed products. These rules require disclosure of current FDA status by appropriate labeling of all displayed products, such as medical devices and pharmaceuticals. Further information on these rules and regulations may be obtained from the FDA.

### **Responsibilities**

- \* Telephone service, electrical service, decorating services, and security guard services are NOT provided not arranged for by the TSCAP.
- \* The exhibitor agrees to indemnify and hold harmless the TSCAP from and against any and all damages arising from the use by the exhibitor of its exhibit space or its activities therewith. The TSCAP, nor the facility, assumes the responsibility for damage to, loss, or theft of property of the exhibitors, or the exhibitors' agents, employees, or invitees.
- \* Use of a booth space by two or more firms is not permitted.
- \* In the event of failure or inability of the TSCAP to provide the space designated, the TSCAP agrees to refund in full to the exhibitor the exhibit fee paid.

### **Confirmation**

Upon receipt of your exhibit space form and social registration form, the TSCAP will send a confirmation detailing shipping and other information.

### **Cancellation**

Deadline for cancellation of exhibit space is June 1. There will be no refunds for cancellations after this date.