



**TEXAS SOCIETY OF PSYCHIATRIC PHYSICIANS**

**SPRING MEETING**

**Registration For Exhibit Display Space**

**APRIL 27, 2019**

**Westin Austin at the Domain Hotel, Austin, 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 Psychiatric Physicians' exhibit policies and hereby agree to the terms and requirements as outlined:*

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

**Choose a Social/Exhibit level (see exhibit levels and benefits on next page)**

- Diamond Level      \$7,000**
- Platinum Level      \$5,000**
- Gold Level              \$3,000**
- Exhibit ONLY         \$2,000**

**TSPP Tax ID: 74-1775166**

**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>E-Mail</i> | <i>Fax #</i> |
|-------------------------------|------------------------------------------|-------------------------|----------------|---------------|--------------|
|                               |                                          |                         |                |               |              |
|                               |                                          |                         |                |               |              |

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

Who are your direct competitors/name of organization? \_\_\_\_\_

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

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

**Return Form To: Debbie Giarratano, Texas Society of Psychiatric Physicians  
401 West 15<sup>th</sup> Street, Suite #675, Austin, TX 78701 \* Phone: (512) 478-0605 \* Fax: (512) 478-5223**

|                                                                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Diamond Level    \$7,000</b><br/> <b>Saturday Luncheon Program</b></p> <p><b>Platinum Level    \$5,000</b><br/> <b>(Saturday AM &amp; PM Refreshments)</b></p> <p><b>Gold Level            \$3,000</b><br/> <b>(Saturday AM or PM Hospitality/<br/> Refreshment Break)</b></p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

If you are interested in underwriting a particular event, please  check the appropriate box below:

**Saturday, April 27**

- AM *or* PM Hospitality / Refreshment Break (\$3,000)
- AM *and* PM Refreshment Breaks (\$5,000)
- Luncheon Program (\$7,000)

**As an exhibitor, by underwriting an event at the Gold, Platinum or Diamond level your company receives one complimentary exhibit space and has the additional advantages of:**

- \* **Acknowledgment at Luncheon**  
*(Gold, Platinum and Diamond Levels)*
- \* **Special Acknowledgment in Texas Psychiatrist Newsletter**  
*(Gold, Platinum and Diamond Levels)*
- \* **Recognition in all on-site materials** *(Gold, Platinum & Diamond Levels)*
- \* **Special recognition on event signage.** *(Gold, Platinum & Diamond Levels)*

Enclosed is my check for \$ \_\_\_\_\_ OR \_\_\_\_\_

Please Charge \$ \_\_\_\_\_ to my:     VISA     MasterCard     American Express

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name of Cardholder: (as it appears on card) \_\_\_\_\_

Zip Code (where you receive your credit card statement) \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

# TSPP

## Exhibitor Policies

### Exhibits

For Gold, Platinum and Diamond levels exhibit display space is included in your fee. This will guarantee the following:

1. One 6' skirted table for display, 2 chairs.
2. Introduction to sponsored event audience.
3. List of Attending Physicians provided after the conference, if requested.
4. Complimentary admittance to social functions (for Platinum, Gold and Diamond Exhibit Levels), if requested in advance.

### 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 TSPP reserves the right to screen applications for space and to accept only those which conform to these criteria. Unethical conduct or infraction of TSPP 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 nor arranged for by the TSPP.
- \* The exhibitor agrees to indemnify and hold harmless the TSPP from and against any and all damages arising from the use by the exhibitor of its exhibit space or its activities therewith. The TSPP, 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 organizations **is not permitted.**
- \* In the event of failure or inability of the TSPP to provide the space designated, the TSPP agrees to refund in full to the exhibitor the exhibit fee paid.

### Confirmation

Upon receipt of your exhibit space form and payment, TSPP will send confirmation.

### Cancellation

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