

Department of Radiology

# **Radiation Oncology: Current Practice and Future Direction**

January 8-12, 2024 Fairmont Kea Lani, Maui, Hawaii

**EXHIBITOR** PROSPECTUS

# **DEAR INDUSTRY COLLEAGUES:**

Mayo Clinic Department of Radiology Continuing Medical Education Office is pleased to announce our 2024 Mayo Clinic Radiation Oncology: Current Practice and Future Direction course which will be held January 8-12, 2024, at the Fairmont Kea Lani in Maui, Hawaii

Mayo Clinic Radiation Oncology: Current Practice and Future Direction is intended to provide balanced and multidisciplinary discussion of contemporary cancer treatment using didactic lectures, panel discussions, and poster sessions. This course is designed for radiation oncologists, radiation oncology residents, radiation biologists, radiation physicists, dosimetrists, oncologists working in related specialties, radiation therapists, radiation oncology nurses, oncologic surgeons, radiation oncology administrators, diagnostic radiologists, and all other health professionals involved in the field of radiation oncology.

Mayo Clinic recognizes these types of educational programs would not be possible without your support. Therefore, we invite you to exhibit at this educational activity with an exhibit fee in the amount of \$5,000. This fee is for the exhibit space, which includes one draped table and two chairs. In support of ACCME guidelines, exhibitors will be located in a separate area from the educational activity but near the food and beverage area for optimal contact during breakfast and coffee breaks.

To exhibit at this course:

- Complete and return the provided Exhibitor Agreement form. This agreement may be substituted with your company's standard Letter of Agreement form.
- Submit payment before December 13, 2023. Please make payment payable to Mayo Clinic and send to the address below. For your convenience, our Federal tax identification number is
- 41-6011702.

# **GENERAL INFORMATION**

**Official Meeting Dates** January 8-12 2024

Welcome Reception January 8th, 2024 6-8 p.m.

**Meeting Location** The Fairmont Kea Lani Maui, Hawaii

**Expected Attendees** 150 Radiation Oncologists

**Booth Fee** \$5,000

#### Room Rate/Deadline

Starting at \$499 by Dec. 6, 2024. Each exhibit table is allowed 2 rooms in the course room block. Early reservations are highly encouraged. See our website for lodging info.

## **EXHIBIT SCHEDULE**

Vendors will be allowed to exhibit during all breakfast and break times throughout the course. Once finalized the program schedule will be available on our website.

# WHY SPONSOR

Technical and educational exhibits provide a professional and educational environment in which attendees can receive demonstrations, view products and services and discuss the uses of your products and/or services. Additionally, the exhibits enhance the educational content of the meeting helping to provide quality continuing medical education.

Benefits of Sponsorship:

- Interact face-to-face with numerous medical professionals
- Build visibility for your company in a competitive marketplace
- Expand your customer base and strengthen existing customer relationships
- Introduce new products and services
- Additional advertisement opportunities to expand reach and further socialize with attendees

# PAYMENT

Payments are due no later than Dec. 13, 2023. Acceptable methods: VISA, Master Card, AMEX or check.

Please see Exhibitor Agreement form blow for more information.

## **KEY CONTACTS**

If interested in exhibiting and have questions, please contact:

#### Holly Schlink

CME Specialist schlink.holly@mayo.edu 507-284-2849





# Mayo School of Continuous Professional Development (MSCPD) Exhibitor Agreement

Agreement between: ACCREDITED PROVIDER: Mayo Clinic College of Medicine – MSCPD AND:

Activity Title	Mayo Clinic Radiation Oncology: Current Practice and Future Direction		
Activity Number	24R01011		
Location	Fairmont Kea Lani, Maui Hawaii		
Dates	January 8-12, 2024		
Company Name (Exhibitor)			
(as it should appear on printed materials)			
Exhibit Contact (if different then exhibit Rep.)			
Name(s) of Representative(s) exhibiting:			
(Maximum of two representatives allowed per			
exhibit)			
Address			
Telephone			
Fax			
Email			
The named exhibitor wishes to exhibit at the above named activity for the amount of \$5,000			\$5,000

# TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at <u>www.accme.org</u>: SCS 4.2: "Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME." "For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity."**
- EXHIBITOR may only distribute educational promotional materials at their exhibit space. Distribution of noneducational items (pens, notepads, etc.), pharmaceuticals or product samples is prohibited.
- All exhibit fees associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint provider, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.

# By signing below, I agree to the "Terms and Conditions" outlined on Page 1 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

The person signing below is authorized to enter into this agreement:

Exhibitor Representative Name	Signature	Date
Mayo Clinic Representative Name	Signature	Date

# PAYMENT INFORMATION

#### Please indicate your method of payment:

#### PROVIDER Federal Tax ID number is 41-6011702.

Please remit check payable to: Mayo Clinic- Mayo School of CPD. Please identify name of course on the check stub.

	Credit Card
Make payable to:	For payment by credit card, please call the Radiology CME
Mayo Clinic	Office Registrar at 866-246-1581
Remit to:	Do not send credit card information via email or fax.
Mayo Clinic	
Department of Radiology CME	
Attn: Holly Schlink, RO_MA_02_W2-RAD	
200 First Street SW	
Rochester, MN 55905	
Please identify <b>Radiation Oncology</b> on the check.	

**NOTE**: There may be additional charges depending on the meeting location (power, internet access, etc). *Please list additional requests here:* 

Complete and return this form along with your payment made to Mayo Clinic, Federal Tax ID# 41-6011702 before **December 13, 2023** to: Mayo Clinic Department of Radiology CME Attn: Holly Schlink RO\_MA\_02\_W2-RAD 200 First Street SW Rochester, MN 55905 T: 507-284-2849; F: 507-266-3061