



AMERICAN SOCIETY
FOR MOHS SURGERY



Exhibitor Opportunities

and Sponsorship Packages

Fundamentals of Mohs Surgery Course

**A Premier Educational Meeting for Dermatologists and
Dermatologic Surgeons**

November 9-12, 2017

**DoubleTree Hotel San Diego, Mission Valley
San Diego, California**

Exhibit Hall Schedule

**Please note: Above times indicate highest traffic times only.
The Exhibit area remains open during all conference hours.*

Wednesday, November 8

Noon- 7:00 pm Exhibitor Set-up

Thursday, November 9

7:00 am- 7:45 am Exhibitor Hall Open
9:30 am- 9:50 am Exhibitor Hall Open
11:45 am- 1:15 pm Exhibitor Hall Open
3:25 pm- 3:40 pm Exhibitor Hall Open
5:20 pm- 6:00 pm Exhibitor Hall Open

Friday, November 10

7:00 am- 7:55 am Exhibitor Hall Open
9:30 am- 9:50 am Exhibitor Hall Open
12:05 pm- 1:45 pm Exhibitor Hall Open
3:35 pm- 4:00 pm Exhibitor Hall Open

Saturday, November 11

7:00 am- 7:55 am Exhibitor Hall Open
9:45 am- 10:20 am Exhibitor Hall Open
12:00 pm- 1:45 pm Exhibitor Hall Open
5:15 pm- 5:30 pm Exhibitor Hall Open
6:00 pm Exhibitor Tear-down

Sunday, November 12

7:00 am- 8:15 am Exhibitor Hall Open
8:30 am Exhibitor Tear-down

Hotel Location and Reservations Info

DoubleTree Hotel San Diego, Mission Valley

7540 Hazard Center Drive
San Diego, CA 92108

Group Rates:

Guest Room Rate: \$175 per night (single or Double occupancy- Queen/King Bed options)

Telephone Reservations: 1-800-222-8733

Note: Reservations cut-off date is Wednesday, October 25, 2017

Exhibitor Information

Space Assignment and Payment

Exhibit space will be assigned and confirmed by the ASMS in the order applications are received. Full payment is required at time of application. Upon arrival at hotel, please check in at ASMS Registration desk.

Cancellations and Refunds

Exhibit space may be cancelled no later than October 1, 2017 in order to receive a 50% refund. Cancellation notifications must be submitted in writing to Novella Rodgers, ASMS Executive Director. Any cancellation requests received after October 1 will not result in a fee refund.

ASMS Contact

Brooke Kimberlin, Executive Assistant; bkimberlin@mohssurgery.org;
Telephone: 800.616.ASMS (2767); Fax: 714.362.9540

Exhibitor Information

See separate DoubleTree Hotel shipping, storage and electrical request information. If any questions, please contact our DoubleTree representative, Melanie Male at the below email address or phone number.

► DoubleTree Hotel San Diego, Mission Valley

Stephanie Tan, Senior Event Services Manager
Tel. 619-688-4036 Fax 619-688-4088
Email: stephanie.tan@hilton.com



2017 Fundamentals of Mohs Surgery Course Sponsorship Packages

SILVER: \$4,500

Benefits:

- Sponsor Daily Breakfast (Options: Thursday, Friday, or Saturday)
- 2 6' Draped Tables (Includes 4 Name Badges)
- First Come, First Serve Basis (Based on Payment)
- Recognition Banner Displayed at Sponsored Breakfast
- Company Recognition Tabletop Sign for Booth Display at Booth
- Company Listing on Exhibitor Banner with Provided Logo
- Company Listing on ASMS Website with Provided Logo
- Company Listing in ASMS Member Newsletter with Provided Logo

BRONZE: \$3,000

Benefits:

- Sponsor Daily Refreshment Break (Options: Thursday, Friday, or Saturday)
- 2 6' Draped Tables (Includes 4 Name Badges)
- Booth Selection on First Come, First Serve Basis (Based on Payment)
- Company Recognition Tabletop Banner for Display Booth
- Company Listing on Exhibitor Banner with Provided Logo
- Company Listed on ASMS Website with Provided Logo
- Company Listing in ASMS Member Newsletter with Provided Logo

EXHIBITOR: \$1,750

Benefits:

- 6-Foot Draped Table (Includes 2 Name Badges)
- First Come, First Serve Basis (Based on Payment)
- Company Listing on Exhibitor Banner with Provided Logo
- Company Listing on ASMS Website with Provided Logo
- Company Listing in ASMS Member Newsletter with Provided Logo

EXHIBITOR APPLICATION

ASMS Fundamentals of Mohs Surgery Course November 9-12, 2017

DoubleTree Hotel San Diego, Mission Valley

Company Name _____

Name of Administrative Contact _____

Company Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ Cell _____

Email _____ Web Address _____

(All meeting information will be sent to this address unless otherwise indicated)

Please email Brooke Kimberlin (bkimberlin@mohssurgery.org) your company logo and description of your company's products and services in 75 words or less.

On-Site Representative Names

(Two or four badges are included with each exhibit option – refer to page 4. Additional person charge: \$50 each.)

1. _____
2. _____
3. _____
4. _____

We agree to abide by the exhibit specifications outlined by the ASMS and to all conditions under which the exhibit area is leased to the ASMS by the DoubleTree Hotel. Said exhibit specifications become a part of this contract.

Signature _____

Silver \$4,500

Bronze \$3,000

Exhibitor \$1,750

Total Payment

Please make checks payable to AMERICAN SOCIETY FOR MOHS SURGERY

(Fed. Tax ID 33-0445634)

For credit card payment, please complete the following information:

Visa MC AMEX Discover Card # _____

Expiration Date _____ Verification Code (3-4 digit) _____

Total Amount _____

Authorized Signer/Cardholder _____

connect
discover
advance



AMERICAN SOCIETY
FOR MOHS SURGERY

Tel: 800-616-2767 or 714-379-6262

Fax: 714-362-9540

6475 E. Pacific Coast Hwy., Box 700

Long Beach, CA 90803

www.mohssurgery.org